

2002 **UNIFORM BUSINESS REPORT (UBR)**

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91165 020 ****61.25

DOCUMENT # N36884

1. Entity Name

PARKWOOD ESTATES PROPERTY OWNERS ASSOCIATION, IN

Principal Place of Business

Mailing Address

4400 HIGHWAY 20 E
 SUITE 313
 NICEVILLE FL 32578
 USA

P.O. BOX 5263
 NICEVILLE FL 32578
 USA

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2988008

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HALBERT, FRANK
 1739 BOLTON VILLAGE
 NICEVILLE FL 32578

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Frank Halbert

Frank Halbert

MAY 01 2002

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing
 Trust Fund Contribution.

☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME HALBERT, FRANK
 STREET ADDRESS 1739 BOLTON VILLAGE LANE
 CITY-ST-ZIP NICEVILLE FL 32578 ☐ Delete

TITLE D
 NAME DAVE SHELKOFF
 STREET ADDRESS 1630 PARKSIDE CIR
 CITY-ST-ZIP NICEVILLE FL 32578 ☐ Change ☒ Addition

TITLE VPB
 NAME TIM STAPLETON
 STREET ADDRESS 1681 PARKSIDE CIR
 CITY-ST-ZIP NICEVILLE FL 32578 ☐ Delete

TITLE D
 NAME RHONDA ZAPATA
 STREET ADDRESS 1764 OSPREY DRIVE
 CITY-ST-ZIP NICEVILLE FL 32578 ☐ Change ☒ Addition

TITLE STD
 NAME HUFSTEDLER, JON
 STREET ADDRESS 1706 DELLMONT COVE
 CITY-ST-ZIP NICEVILLE FL ☐ Delete

TITLE TD
 NAME JON HUFSTEDLER
 STREET ADDRESS 1706 DELLMONT COVE
 CITY-ST-ZIP NICEVILLE FL 32578 ☒ Change ☐ Addition

TITLE TD
 NAME STEVE CZONSTKA
 STREET ADDRESS 4554 REDBUD TRAIL
 CITY-ST-ZIP NICEVILLE FL 32578 ☐ Delete

TITLE SD
 NAME STEVE CZONSTKA
 STREET ADDRESS 4554 REDBUD TRAIL
 CITY-ST-ZIP NICEVILLE FL 32578 ☒ Change ☐ Addition

TITLE D
 NAME HOOVER, DICK
 STREET ADDRESS 1652 PARKSIDE CIR
 CITY-ST-ZIP NICEVILLE FL 32578 ☒ Delete

TITLE D
 NAME MARLENE SUAREZ
 STREET ADDRESS 4549 CASTLEWOOD LANE
 CITY-ST-ZIP NICEVILLE FL 32578 ☐ Change ☒ Addition

TITLE D
 NAME MIKE DUGGAN
 STREET ADDRESS 1050 BAY DRIVE
 CITY-ST-ZIP NICEVILLE FL 32578 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Frank Halbert

MAY 01 2002