

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N45524 (8)

1. Corporation Name
PARKWOOD VIII ASSOCIATION, INC.



Principal Place of Business Mailing Address
P.O. BOX 771724 CORAL SPRINGS FL 33077-1724

3. Date Incorporated or Qualified **10/07/1991** 3a. Date of Last Report **12/15/1995**

2. Principal Place of Business 2a. Mailing Address

4. FEI Number **65-0343412** Applied For Not Applicable

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

22. City & State 27. City & State

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

23. Zip Country 28. Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24. Zip Country 25. Zip Country 29. Zip Country 30. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BONFIGLIO, VICTOR
12372 SW 1 STREET
CORAL SPRINGS FL 33071**

81 Name **Andrew Panico**
82 Street Address (P.O. Box Number is Not Acceptable) **12340 SW 1 Street**
83
84 City **Coral Springs FL** 85 Zip Code **33071**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Andrew Panico** Pres. DATE **4/2/96**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTD	<input checked="" type="checkbox"/> DELETE
NAME	BONFIGLIO, VICTOR	
STREET ADDRESS	12372 SW 1 STREET	
CITY - ST - ZIP	CORAL SPRINGS FL 33071	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	PANICO, ANDREW	
STREET ADDRESS	12340 SW 1 STREET	
CITY - ST - ZIP	CORAL SPRINGS FL 33071	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	ADELMAN, STEVE	
STREET ADDRESS	12317 SW 1 STREET	
CITY - ST - ZIP	CORAL SPRINGS FL 33071	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Andrew Panico	
1.3 STREET ADDRESS	12340 SW 1 Street	
1.4 CITY - ST - ZIP	Coral Springs FL 33071	
2.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Steve Adelman	
2.3 STREET ADDRESS	12317 SW 1 Street	
2.4 CITY - ST - ZIP	Coral Springs FL 33071	
3.1 TITLE	SD/VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Mail Hill	
3.3 STREET ADDRESS	12389 SW 1 Street	
3.4 CITY - ST - ZIP	Coral Springs FL 33071	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 register or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Andrew Panico** DATE: **4/2/96** DAYTIME PHONE #: **954 344-9455**

CR2E037 (12/95)