

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

FILED

98 JUN -5 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # N97000003922 (8)

1. Corporation Name

G. V. OF PARKER LAKES NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business

Mailing Address

9400 GLADIOLUS DR., STE. 250
FT. MYERS FL 33908

9400 GLADIOLUS DR., STE. 250
FT. MYERS FL 33908

3. Date Incorporated or Qualified

07/09/1997

4. FEI Number

65-0768267

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KUSSNER, STEPHEN L
STE. 2100, 1 TAMPA CITY CENTER BUILDING
TAMPA FL 33801**

81 Name

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

83

84 City

FL

85

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME **DP REISMAN, JOHN**
STREET ADDRESS **9400 GLADIOLUS DR., STE. 250**
CITY-ST-ZIP **FT. MYERS FL 33908**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE DELETE
NAME **DV GULLO, VINCE**
STREET ADDRESS **9400 GLADIOLUS DR., STE. 250**
CITY-ST-ZIP **FT. MYERS FL 33908**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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TITLE DELETE
NAME **DST KNIZNER, DAVE**
STREET ADDRESS **9400 GLADIOLUS DR., STE. 250**
CITY-ST-ZIP **FT. MYERS FL 33908**

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receiver 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, on an attachment with an address.

SIGNATURE:

John Reisman *John Reisman* *John Reisman* *John Reisman*

CR2E037 (10/97)