2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2008
Secretary of State

DOCUMENT# N01000007956

Entity Name: PARKSIDE AT ERROL ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8009 S. ORANGE AVE
ORLANDO, FL 32809

New Principal Place of Business:

5955 T.G. LEE BLVD
300
ORLANDO, FL 328224457

Current Mailing Address:

8009 S. ORANGE AVE
ORLANDO, FL 32809

New Mailing Address:

5955 T.G. LEE BLVD
300
ORLANDO, FL 328224457

FEI Number: 59-3755087 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FURLOW, REBECCA
8009 S. ORANGE AVE
2180 W. SR. 434, STE. 5000
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

FURLOW, REBECCA
5955 T.G. LEE BLVD
300
ORLANDO, FL 328224457 US

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: REBECCA FURLOW 04/11/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MISKELL, DANA
Address: 1347 MADISON IVY CIRCLE
City-St-Zip: APOPKA, FL 32712

Title: VPD ( ) Delete
Name: PAGE, BRAIN
Address: 569 AZALEA BLOOM DRIVE
City-St-Zip: APOPKA, FL 32712

Title: S ( ) Delete
Name: GOULD, ROBERT
Address: 1023 PARKSIDE POINTE BLVD
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: PAGE, BRIAN
Address: 569 AZALEA BLOOM DRIVE
City-St-Zip: APOPKA, FL 32712

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANA MISKELL P 04/11/2008
Electronic Signature of Signing Officer or Director Date