

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743808

FILED
Mar 11, 2009
Secretary of State

Entity Name: PARKS EDGE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3201 S W LANDALE BLVD
PORT ST LUCIE, FL 349536358

New Principal Place of Business:

Current Mailing Address:

3201 S W LANDALE BLVD
PORT ST LUCIE, FL 349536358

New Mailing Address:

FEI Number: 59-2058764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINCH, DONALD
481 SW BELMONT CIR
PORT SAINT LUCIE, FL 34953 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: CARLSON, BRUCE
Address: 667 SW BELMONT CIR
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: S () Delete
Name: DEJOIE, BEATRICE
Address: 743 SW BRIDGEPORT DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: T3 () Delete
Name: TAYLOR, DANIEL
Address: 3020 SW LONGLEAF CT
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D () Delete
Name: STAMPER, CHRISTOPHER
Address: 757 SW BRIDGEPORT DR
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D () Delete
Name: FADDEN, SEAN
Address: 3074 SW LONGLEAF CT
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: P () Delete
Name: SCHMITT, JAMES
Address: 3241 SW RONLEA CT
City-St-Zip: PORT SAINT LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CRUMP, EUNICE
Address: 350 SW BRIDGEPORT DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VP (X) Change () Addition
Name: SCHMITT, JAMES
Address: 3241 SW RONLEA CT.
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: T3 (X) Change () Addition
Name: WALKER, ARLENE
Address: 692 SW EVERETT CT.
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D (X) Change () Addition
Name: FINCH, DONALD
Address: 481 SW BELMONT CR.
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: S (X) Change () Addition
Name: DEROCHER, TINA
Address: 3030 SW BLOUT CT.
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D (X) Change () Addition
Name: HOWELL, JOSEPH
Address: 680 SW BELMONT CR.
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: EUNICE CRUMP

P

03/11/2009

Electronic Signature of Signing Officer or Director

Date