

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2003 8:00 am
Secretary of State

03-05-2003 90044 027 ****61.25

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1. Entity Name

PARKSIDE TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

**1192 E NEWPORT CENTER DR
#150
DEERFIELD BEACH FL 33442**

Mailing Address

**1192 E NEWPORT CENTER DR
#150
DEERFIELD BEACH FL 33442**

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 **48-1256432**

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

**RODRIGUEZ, JUAN E
8000 GOVERNORS SQUARE BLVD STE 101
MIAMI LAKES FL 33016**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	DP						
	HUMPHRIES, MICHAEL	1192 E NEWPORT CENTER DR, #150	DEERFIELD BEACH FL 33442				
	DV						
	ROCA, RAFAEL	1192 E NEWPORT CENTER DR, #150	DEERFIELD BEACH FL 33442				
	DS						
	SHARPSTEEN, CANDACE	1192 E NEWPORT CENTER DR, #150	DEERFIELD BEACH FL 33442				
	T						
	GUERRA, FRANCES J	1192 E NEWPORT CENTER DR, #150	DEERFIELD BEACH FL 33442				

12. 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 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: *CANDACE SHARPSTEEN, Inc.*

2/19/03 954-428-4854

CR2E037 (10/02)