

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750564

**Entity Name:** PARKWAY PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O GPM INC  
1319 MIRAMAR ST #101  
CAPE CORAL, FL 33904

**Current Mailing Address:**

C/O GPM INC  
1319 MIRAMAR ST #101  
CAPE CORAL, FL 33904 US

**FEI Number:** 65-0056480

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ZUNINO, PAOLA  
C/O GPM INC  
1319 MIRAMAR ST #101  
CAPE CORAL, FL 33904 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:** PAOLA ZUNINO

04/10/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name ROSEMA, SHELLY  
Address 4803 SW SANTA BARB. CT 10  
City-State-Zip: CAPE CORAL FL 33904

Title ST  
Name SCHWARTZ, CECILIA  
Address 4803 SW SANTA BARBARA CT., #11  
City-State-Zip: CAPE CORAL FL 33914

Title PRESIDENT  
Name STRAMICH, WILLIAM  
Address 4803 SW SANTA BARBARA COURT, #7  
City-State-Zip: CAPE CORAL FL 33914

Title VP  
Name SCHULER, JAMES  
Address 4803 SW SANTA BARBARA CT. #8  
City-State-Zip: CAPE CORAL FL 33914

Title DIRECTOR  
Name AVALOS, CHARLES  
Address 4803 SW SANTA BARB CT. #2  
City-State-Zip: CAPE CORAL FL 33914

*I hereby 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 all other like empowered.*

**SIGNATURE:** WILLIAM STRAMICH

PRES

04/10/2017

Electronic Signature of Signing Officer/Director Detail

Date