

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00961

Entity Name: PARKVIEW OF STUART CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O COASTAL PROPERTY MANAGEMENT
10 SE CENTRAL PARKWAY SUITE 400
STUART, FL 34994**Current Mailing Address:**C/O COASTAL PROPERTY MANAGEMENT
10 SE CENTRAL PARKWAY SUITE 400
STUART, FL 34994 US**FEI Number:** 59-2434420**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROSS, EARLE, BONAN & ENSOR, PA
789 S. FEDERAL HIGHWAY - SUITE 101
STUART, FL 34994 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:** DEBORAH ROSS

04/30/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	ZEBIB, JENNIFER
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE 400

City-State-Zip: STUART FL 34994

Title	SECRETARY
Name	RUSO, SAL
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE 400

City-State-Zip: STUART FL 34994

Title	TREASURER
Name	BITTENBENDER, GEORGE
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE 400

City-State-Zip: STUART FL 34994

Title	VP
Name	SPEIRS, HOLLY
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE 400

City-State-Zip: STUART FL 34994

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: SAL RUSSO**SECRETARY**

04/30/2021

Electronic Signature of Signing Officer/Director Detail

Date