

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000000895

**Entity Name:** PARKSTONE HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Jan 23, 2013**  
**Secretary of State**  
**CC2293955044**

**Current Principal Place of Business:**

C/O THRESHOLD PROPERTY MGMT.CORP  
4023 SAWYER ROAD, SUITE 101  
SARASOTA, FL 34233

**Current Mailing Address:**

C/O THRESHOLD PROPERTY MGMT.CORP  
4023 SAWYER ROAD, SUITE 101  
SARASOTA, FL 34233

**FEI Number: 04-3602133**

**Certificate of Status Desired: No**

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

THRESHOLD PROPERTY MANAGEMENT CORP  
4023 SAWYER ROAD,  
SUITE 101  
SARASOTA, FL 34233 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name WILSON, REBECCA  
Address 4008 BURLWOOD ROAD  
City-State-Zip: SARASOTA FL 34233

Title VP  
Name STAHL, RAMONA M  
Address 3880 DEBERRY DRIVE  
City-State-Zip: SARASOTA FL 34233

Title T  
Name BOAKES, JOHAN  
Address 5301 SILVER LEAF LANE  
City-State-Zip: SARASOTA FL 34233

Title SECRETARY  
Name CRABTREE, TONY  
Address 4000 DEBERRY DRIVE  
City-State-Zip: SARASOTA FL 34233

Title DIRECTOR  
Name MOTTOLLA, ROSANNA  
Address 3824 VIRGA BLVD  
City-State-Zip: SARASOTA FL 34233

*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: REBECCA WILSON**

**PRESIDENT**

**01/23/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date