

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005104

FILED
Feb 10, 2021
Secretary of State
8355102665CC**Entity Name:** PARKWOOD SQUARE LAND CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**4811 S 76TH ST
SUITE 211
GREENFIELD, WI 53220**Current Mailing Address:**4811 S 76TH ST
SUITE 211
GREENFIELD, WI 53220**FEI Number: 76-0706826****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**REALTY MANAGEMENT CONSULTANTS INC
2780 E. FOWLER AVE #2004
TAMPA, FL 33612 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:** REALTY MANAGEMENT CONSULTANTS, INC.**02/10/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PRESIDENT, DIRECTOR
Name RIORDAN, S L
Address 4811 S 76TH ST #211
City-State-Zip: GREENFIELD WI 53220**Title** VPTD
Name BUTTS, GREG
Address 4811 S 76TH ST SUITE 211
City-State-Zip: GREENFIELD WI 53220**Title** DIRECTOR
Name RIORDAN, B R
Address 4811 S 76TH ST
SUITE 211
City-State-Zip: GREENFIELD WI 53220**Title** SECRETARY, DIRECTOR
Name RIORDAN, S L
Address 4811 S 76TH ST
SUITE 211
City-State-Zip: GREENFIELD WI 53220**Title** AUTHORIZED REPRESENTATIVE
Name MILLER, LYNNE M
Address 4811 S 76TH ST
SUITE 211
City-State-Zip: GREENFIELD WI 53220

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: LYNNE M MILLER**AUTHORIZED
REPRESENTATIVE****02/10/2021**

Electronic Signature of Signing Officer/Director Detail

Date