

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N29797

**Entity Name:** PARMA ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

PARMA ESTATES HOA, INC.  
P.O. BOX NUMBER 550526  
FORT LAUDERDALE, FL 33355

**Current Mailing Address:**

PARMA ESTATES HOA, INC.  
P.O. BOX 550526  
FORT LAUDERDALE, FL 33355 US

**FEI Number:** 65-0485971

**Certificate of Status Desired:** No

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

MCCULLOUGH, STEPHEN D. CLA  
STEPHEN D. MCCULLOUGH, CLA  
2702 WEST OAKLAND PARK BOULEVARD SUITE A  
FORT LAUDERDALE, FL 33311 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:** STEPHEN D. MCCULLOUGH

03/30/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FORTIER, KENNETH R  
Address PARMA ESTATES HOA, INC.  
P.O. BOX 550526  
City-State-Zip: FORT LAUDERDALE FL 33355

Title VP  
Name BLASIK, KATHERINE  
Address PARMA ESTATES HOA, INC.  
P.O. BOX 550526  
City-State-Zip: FORT LAUDERDALE FL 33355

Title T  
Name FORTIER, KENNETH R  
Address PARMA ESTATES HOA, INC.  
P.O. BOX 550526  
City-State-Zip: FORT LAUDERDALE FL 33355

Title S  
Name ONTANEDA, CESAR  
Address PARMA ESTATES HOA, INC.  
P.O. BOX 550526  
City-State-Zip: FORT LAUDERDALE FL 33355

*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:** KENNETH R. FORTIER

PRESIDENT

03/30/2015

Electronic Signature of Signing Officer/Director Detail

Date