2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2015
Secretary of State
CC7360759425

DOCUMENT# N36884

Entity Name: PARKWOOD ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1800 BLUEWATER BLVD
NICEVILLE, FL 32578

Current Mailing Address:

P.O. BOX 5274
NICEVILLE, FL 32578-5274 US

FEI Number: 59-2988008

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLIANCE ASSOCIATION MANAGEMENT CO
408 KELLY PLANTATION DR.
DESTIN, FL 32541 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: KIM WINTNER 03/24/2015

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	WEEMHOFF, JIM
Address	1733 OSPREY COVE
City-State-Zip:	NICEVILLE FL 32578

Title	PRESIDENT
Name	BARKER, BRIAN
Address	1741 OSPREY COVE
City-State-Zip:	NICEVILLE FL 32578

Title	DIRECTOR
Name	MCCRACKEN, NEIL
Address	1706 DELLMONT COVE
City-State-Zip:	NICEVILLE FL 32578

Title	SD
Name	MOORE, HEATHER
Address	1720 LILABERRY LN
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	DANNELLY, JEFF
Address	1751 NANCY WARD COVE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	DODGEN, DEBORAH
Address	1671 PARKSIDE CIR
City-State-Zip:	NICEVILLE FL 32578

Title	DIRECTOR
Name	FLOYD, JEAN
Address	1717 LILABERRY LANE
City-State-Zip:	NICEVILLE FL 32578

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: BRIAN BARKER PRESIDENT 03/24/2015

Electronic Signature of Signing Officer/Director Detail — Date