

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 26, 2007 8:00 am**  
**Secretary of State**

02-26-2007 90074 012 \*\*\*\*61.25

**DOCUMENT # 713291**

1. Entity Name

PARK VIEW CONDOMINIUM INC. NO. 1



Principal Place of Business

Mailing Address

800 71 AVENUE NORTH  
ST PETERSBURG FL 33702

800 71 AVENUE NORTH  
ST PETERSBURG FL 33702



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRAUSE, MARILYN  
800 71ST AVE. N.  
STE. 5  
ST PETE FL 33702

Name Scheff, Lois  
Street Address (P.O. Box Number is Not Acceptable)  
800 71ST AVE N  
Ste 4  
City St. Petersburg **FL** Zip Code 33702

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Lois Scheff*

Lois SCHEFF

2-12-07

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete  
NAME BRAUSE, MARLYN  
STREET ADDRESS 800 NORTH 71ST AVE  
CITY - ST - ZIP ST. PETERSBURG FL

TITLE PD ☒ Change ☐ Addition  
NAME SCHEFF, LOIS  
STREET ADDRESS 800 71ST AVEN.  
CITY - ST - ZIP St. Petersburg, FL 33702

TITLE VD ☐ Delete  
NAME HOWARD, RUTH  
STREET ADDRESS 800 71ST AVE N  
CITY - ST - ZIP SAINT PETERSBURG FL 33702

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE TD ☐ Delete  
NAME LOCKENVITZ, BARBARA  
STREET ADDRESS 800 71ST AVE. N.  
CITY - ST - ZIP SAINT PETERSBURG FL 33702

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE SD ☒ Delete  
NAME BEMIS, KATHY  
STREET ADDRESS 800 71ST AVE N  
CITY - ST - ZIP SAINT PETERSBURG FL 33702

TITLE SD ☒ Change ☐ Addition  
NAME Brause, MARLYN  
STREET ADDRESS 800 71ST AVE N  
CITY - ST - ZIP ST. PETERSBURG, FL 33702

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Barbara Lockenvitz* Barbara Lockenvitz 2/12/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #