


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2008 8:00 am
Secretary of State

07-23-2008 90017 024 ****61.25

DOCUMENT # 719339					
1. Entity Name PARKWAY VILLAS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 6000 CORAL WAY BRADENTON, FL 34207			Mailing Address 6000 CORAL WAY BRADENTON, FL 34207		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		07142008 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 59-1465341	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BECKER & POLIAKOFF, P.A. 630 S ORANGE AVENUE THIRD FLOOR SARASOTA, FL 34236			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)</small>					
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	S	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	YOUNG, VERNOM		NAME	Gaylord, Brenda	
STREET ADDRESS	5990 CORAL WAY		STREET ADDRESS	6048 Coral Way	
CITY-ST-ZIP	BRADENTON, FL 34207		CITY-ST-ZIP	Bradenton, FL 34207	
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLIAMS, BRUCE		NAME	Fernald Steve	
STREET ADDRESS	5980 HIBISCUS DR		STREET ADDRESS	5985 Hibiscus Drive	
CITY-ST-ZIP	BRADENTON, FL 34207		CITY-ST-ZIP	Bradenton, FL 34207	
TITLE	P	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GUTIERREZ, CARLOS		NAME	Williams, Marilyn	
STREET ADDRESS	5983 HIBIXCUS DR		STREET ADDRESS	6095 Coral Way	
CITY-ST-ZIP	BRADENTON, FL 34207		CITY-ST-ZIP	Bradenton, FL 34207	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TORREY, LOIS		NAME	Collier, Jerome	
STREET ADDRESS	2218 ORANGE BLOSSOM		STREET ADDRESS	6008 Hibiscus Drive	
CITY-ST-ZIP	BRADENTON, FL 34207		CITY-ST-ZIP	Bradenton, FL 34207	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YAGER, CAROL K		NAME		
STREET ADDRESS	2223 ORANGE BLOSSOM LN		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34207		CITY-ST-ZIP		
TITLE	TRES	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRFFIN, PAUL		NAME		
STREET ADDRESS	6060 CAROL WAY		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34207		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 files empowered.					
SIGNATURE: <i>Marilyn E. Williams</i> MARILYN E. WILLIAMS			Date: 15 July 2008 941-580-3368		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		