

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2005 8:00 am
Secretary of State

02-21-2005 90083 024 ****61.25

DOCUMENT # 720756

1. Entity Name

PARKVIEW VILLAS ASSOCIATION, INC.



Principal Place of Business

2400 LAKE OSBORNE DR.
LAKE WORTH FL 33461
US

Mailing Address

2400 LAKE OSBORNE DR.
LAKE WORTH FL 33461
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1512926

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUTERA, C
2400 LAKE OSBOURNE DR.
APT 109
LAKE WORTH FL 33461

7. Name and Address of New Registered Agent

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

Ronald Bockman

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/15/05

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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

TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	BOCKMAN, JEAN	
STREET ADDRESS	2440 LAKE OSBORNE DR	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	BUTERA, CARMINE	
STREET ADDRESS	2400 LAKE OSBORNE DRIVE	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MCLIWAIN, RUBY L	
STREET ADDRESS	2440 LAKE OSBORNE DR	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	HEINEMANN, EDWARD	
STREET ADDRESS	2440 LAKE OSBORNE DR.	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	HEINEMANN, DINA	
STREET ADDRESS	2440 LAKE OSBORNE DR.	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAROL FAUSTMAN	
STREET ADDRESS	2440 LAKE OSBORNE DRIVE # 209	
CITY-ST-ZIP	LAKE WORTH, FL. 33461	
TITLE	VICE-PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARL CARPINELLI	
STREET ADDRESS	2440 LAKE OSBORNE DRIVE # 105	
CITY-ST-ZIP	LAKE WORTH, FL 33461	
TITLE	DIRECTOR AT LARGE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDON GUYETT	
STREET ADDRESS	2440 LAKE OSBORNE DRIVE # 214	
CITY-ST-ZIP	LAKE WORTH, FL 33461	
TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELAINE GUYETT	
STREET ADDRESS	2440 LAKE OSBORNE DRIVE # 214	
CITY-ST-ZIP		
TITLE	TREASURER	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RONALD BOCKMAN	
STREET ADDRESS	2440 LAKE OSBORNE DRIVE # 109	
CITY-ST-ZIP	LAKE WORTH, FL 33461	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *RONALD BOCKMAN*

Ronald Bockman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR-TREASURER

2/15/05

561-540-9096

Date

Daytime Phone #