

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 05, 2003 8:00 am**  
**Secretary of State**

03-05-2003 90037 049 \*\*\*\*61.25

**DOCUMENT # 720919**

1. Entity Name

**PARKWOOD ACRES CIVIC ASSOCIATION, INC.**



Principal Place of Business

**9734 DICK ST.  
HUDSON FL 34669**

Mailing Address

**9734 DICK ST.  
HUDSON FL 34669**

2. Principal Place of Business

3. Mailing Address

**9704 Ed ST**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Hudson FL**

Zip

Country

**34669**

Country

**Pasco**

4. FEI Number **59-1688898**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**CONDON, PHILLIP  
9603 PAT ST.  
HUDSON FL 34669**

7. Name and Address of New Registered Agent

Name **Patricia ARLOZYNSKI**

Street Address (P.O. Box Number is Not Acceptable)

**13815 Parkwood ST**

City **Hudson**

**FL**

Zip Code  
**34669**

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 **JANE Aldrich**

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

**Jane Aldrich**

(NOTE: Registered Agent signature required when reinstating)

**Feb. 10, 2003**

DATE

**FILE NOW: FEE IS \$61.25**

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	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	CONDON, PHILLIP	9603 PAT ST.	HUDSON FL 34669	<input checked="" type="checkbox"/>
V	ARLOZYNSKI, PATRICIA	13815 PARKWOOD ST.	HUDSON FL 34669	<input checked="" type="checkbox"/>
S	ALDRICH, JANE	9704 ED ST.	HUDSON FL 34669	<input type="checkbox"/>
T	WEBSTER, STEPHIE	9620 GARY ST.	HUDSON FL 34669	<input type="checkbox"/>
D	SPALDING, KATHERINE	12420 LITEWOOD DR.	HUDSON FL 34669	<input checked="" type="checkbox"/>
D	SHARON, RATASCZYK	9613 GARY STREET	HUDSON FL 34669	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
V	Tom Cardillo	12135 Chuck Circle	Hudson, FL 34669	<input type="checkbox"/>	<input type="checkbox"/>
P	PATRICIA ARLOZYNSKI	13815 Parkwood ST	HUDSON, FL 34669	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
D	PAUL RASTNER	12928 Parkwood ST	HUDSON, FL 34669	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

**SIGNATURE REQUIRED**

**Secretary**

**3/3/03**

**727 868-8743**

CR2E037 (10/02)