

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2008 8:00 am**  
**Secretary of State**

04-18-2008 90029 014 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                     |                                                                                     |                                                              |                                                                                                                                                                                       |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # 722868</b><br>1. Entity Name<br><b>PARKVIEW EAST OWNERS ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                     |                                                                                     |                                                              |                                                                                                      |  |
| Principal Place of Business<br><b>409 MANATEE COURT<br/>VENICE, FL 34285</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                     |                                                                                     |                                                              | Mailing Address<br><b>409 MANATEE COURT<br/>VENICE, FL 34285</b>                                                                                                                      |  |
| 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                                                      | 4. FEI Number<br><b>59-1506859</b>                                                                                                                                                    |  |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                     |                                                                                     |                                                              | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                |  |
| 6. Name and Address of Current Registered Agent<br><br><b>SMITH, CARA M<br/>409 MANATEE CT<br/>SUITE 106<br/>VENICE, FL 34285</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                     |                                                                                     |                                                              | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <span style="float: right;"><b>FL</b></span> 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                     |                                                                                     |                                                              |                                                                                                                                                                                       |  |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                     | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                              | <b>\$5.00 May Be<br/>Added to Fees</b>                                                                                                                                                |  |
| <b>Make check payable to<br/>Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                     |                                                                                     |                                                              |                                                                                                                                                                                       |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                     |                                                                                     | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b> |                                                                                                                                                                                       |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>P</b><br><b>JOHNSTON, BEVERLY</b><br><b>409 MANATEE CT. #212</b><br><b>VENICE, FL 34285</b> <input type="checkbox"/> Delete      |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                     |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>VP</b><br><b>SMITH, RICHARD</b><br><b>409 MANATEE CT. #106</b><br><b>VENICE, FL 34285</b> <input type="checkbox"/> Delete        |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                     |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>SD</b><br><b>CONTI, MARY</b><br><b>409 MANATEE CT #213</b><br><b>VENICE, FL 34285</b> <input checked="" type="checkbox"/> Delete |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <b>SD</b><br><b>MARGARET THOMASZCZEWski</b><br><b>409 Manatee Court # 103</b><br><b>VENICE, FL 34285</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>D</b><br><b>SAUTEER, FLORENCE</b><br><b>409 MANATEE CT #102</b><br><b>VENICE, FL 34285</b> <input type="checkbox"/> Delete       |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                     |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>T</b><br><b>SMITH, CARA</b><br><b>409 MANATEE CT. #104</b><br><b>VENICE, FL 34285</b> <input type="checkbox"/> Delete            |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                     |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>D</b><br><b>GOTTSTEIN, WILLIAM</b><br><b>409 MANATEE CT #104</b><br><b>VENICE, FL 34285</b> <input type="checkbox"/> Delete      |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                     |  |
| 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 like empowered. |                                                                                                                                     |                                                                                     |                                                              |                                                                                                                                                                                       |  |
| <b>SIGNATURE:</b> <u>Cara M. Smith</u> <u>CARA M. SMITH</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                     |                                                                                     | Date <u>4/17/08</u> Daytime Phone # <u>941-485-2638</u>      |                                                                                                                                                                                       |  |