


FILE NOW: FILING FEE IS \$61.25

FILED
Apr 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 741523 (5)
1. Corporation Name
PARKWOODS II HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 1719 PARK MEADOWS DRIVE FT. MYERS FL 33907	Mailing Address 1719 PARK MEADOWS DRIVE FT. MYERS FL 33907-3790
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/02/1978	3a. Date of Last Report 02/21/1996
21	22	26	27	4. FEI Number 59-2081912	Applied For Not Applicable
23		28		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
24		29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
25		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**MCCABE, SHEILA
1711-4 PARK MEADOWS DR
FORT MYERS FL 33907**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	Pres <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, NATALIE	1.2 NAME	Stuart Hoffmann
STREET ADDRESS	1713-4 PARK MEADOWS DR	1.3 STREET ADDRESS	1705-2 Park Meadows Dr
CITY-ST-ZIP	FT MYERS FL	1.4 CITY-ST-ZIP	Ft Myers Fl 33907
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JEFFERS, MARTHA	2.2 NAME	
STREET ADDRESS	1703-4 PARK MEADOWS DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL	2.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCABE, SHEILA	3.2 NAME	
STREET ADDRESS	17411-4 PARK MEADOWS DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL	3.4 CITY-ST-ZIP	
TITLE	DV <input checked="" type="checkbox"/> DELETE	4.1 TITLE	V.P. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAPELLA, ERIK	4.2 NAME	Norman LeClatre
STREET ADDRESS	1709-4 PARK MEADOWS DR.	4.3 STREET ADDRESS	1717-4 Parkmeadows Dr
CITY-ST-ZIP	FT.MYERS FL	4.4 CITY-ST-ZIP	Ft Myers Fl 33907
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURKE, KEVIN	5.2 NAME	Christine McCullough
STREET ADDRESS	1711-3 PARK MEADOWS DR	5.3 STREET ADDRESS	1709-2 Park Meadows Dr
CITY-ST-ZIP	FT. MYERS FL	5.4 CITY-ST-ZIP	Ft Myers Fl 33907
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CP2E037 (9/96)