

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741523

FILED
Apr 15, 2010
Secretary of State

Entity Name: PARKWOODS II HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD, SUITE 200
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD, SUITE 200
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 59-2081912 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLE ROAD
SUITE 200
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: SD
Name: HUTCHINSON, LAUREN
Address: 1713 PARK MEADOWS DRIVE #4
City-St-Zip: FORT MYERS, FL 33907

Title: PD
Name: JOINER, VALERIE
Address: 1703 PARK MEADOWS DRIVE
City-St-Zip: FORT MYERS, FL 33907

Title: VPD
Name: JUNGLE, PAT
Address: 1725 PARK MEADOWS DR #3
City-St-Zip: FORT MYERS, FL 33907

Title: TD
Name: FLOYD, LYNDEL
Address: 1719 PARK MEADOWS DR. #3
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LYNDEL FLOYD

TD

04/15/2010

Electronic Signature of Signing Officer or Director

Date