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Mar 06 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 745260 (0)

1. Corporation Name

PARK VIEW III CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

4014 S.E. 20TH PLACE  
CAPE CORAL FL 33904  
US

% BENSON'S INC.  
12650 WHITEHALL DRIVE  
FT. MYERS FL 33907-3619  
US

3. Date Incorporated or Qualified  
12/14/1978

3a. Date of Last Report  
04/05/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number  
59-1929052

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BENSON, MARK R.  
12650 WHITEHALL DR  
FT MYERS FL 33907

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD  DELETE  
NAME SCHULTZ, BARBARA  
STREET ADDRESS 4014 SE 20TH PLACE, #A8  
CITY - ST - ZIP CAPE CORAL, FL 00000

1.1 TITLE P/D  Change  Addition  
1.2 NAME Corbett, Donald  
1.3 STREET ADDRESS 4026 S.E. 20th Pl., #C-4  
1.4 CITY - ST - ZIP Cape Coral, FL

TITLE SD  DELETE  
NAME NEWELL, EDWARD  
STREET ADDRESS 4014 SE 20TH PL #A2  
CITY - ST - ZIP CAPE CORAL, FL 00000

2.1 TITLE S/T/D  Change  Addition  
2.2 NAME Jenkins, Wilma  
2.3 STREET ADDRESS 4022 S.E. 20th Pl., #G-2  
2.4 CITY - ST - ZIP Cape Coral, FL 33904

TITLE VD  DELETE  
NAME FRATER, DONALD  
STREET ADDRESS 4014 SE 20TH PLACE #A1  
CITY - ST - ZIP CAPE CORAL FL

3.1 TITLE V/D  Change  Addition  
3.2 NAME Goslin, Leo  
3.3 STREET ADDRESS 4014 S.E. 20th Pl., #A-7  
3.4 CITY - ST - ZIP Cape Coral, FL

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Donald M. Corbett* 2/11/97

Date

Daytime Phone # 0055476

(941) 277-0718

CP2E037 (9/96)