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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 745260

1. Corporation Name

PARK VIEW III CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

4022 SE 20TH PLACE
 APT G-2
 CAPE CORAL FL 33904
 US

Mailing Address

4022 SE 20TH PLACE
 APT G-2
 CAPE CORAL FL 33904
 US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

12/14/1978

22 City & State

27 City & State

4. FEI Number

Applied For
 Not Applicable

59-1929052

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24 Zip

25 Country

29 Zip

30 Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JENKINS, WILMA
 4022 SE 20TH PLACE
 APT G-2
 CAPE CORAL FL 33904

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 PD DELETE
 NAME CORBETT, DONALD
 STREET ADDRESS 4026 S.E. 20TH PL., #C-4
 CITY-ST-ZIP CAPE CORAL, FL 00000

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE TD DELETE
 NAME JENKINS, WILMA
 STREET ADDRESS 4022 S.E. 20TH PL., #G-2
 CITY-ST-ZIP CAPE CORAL, FL 00000

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE VD DELETE
 NAME GOSLIN, LEO
 STREET ADDRESS 4014 S.E. 20TH PL., #A-7
 CITY-ST-ZIP CAPE CORAL FL

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE SD DELETE
 NAME DIPALO, ALBERTA
 STREET ADDRESS 4020 SE 20TH PLACE, F-4
 CITY-ST-ZIP CAPE CORAL FL 33904

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

TITLE D DELETE
 NAME PUTZBACH, ANTHONY
 STREET ADDRESS 4020 SE 20TH PLACE, F-2
 CITY-ST-ZIP CAPE CORAL FL 33904

5.1 TITLE Change Addition
 5.2 NAME D RUTH WILLIAMS
 5.3 STREET ADDRESS 4018 SE 20TH PL E1
 5.4 CITY-ST-ZIP CAPE CORAL FL 33904

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 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, with all other like empowered.

SIGNATURE:

Donald Putzbach
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/18/99

941 00524583
 Date Daytime Phone #

CR2E037 (11/98)