

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746400

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Entity Name:** PARKWOOD VILLAS HOMEOWNERS' ASSOCIATION, I, INC.

**Current Principal Place of Business:**

20 PARKWOOD VILLAS CT.  
LEHIGH ACRES, FL 33936

**New Principal Place of Business:**

16 PARKWOOD VILLAS CT.  
LEHIGH ACRES, FL 33936

**Current Mailing Address:**

P O BOX 1058  
LEHIGH ACRES, FL 33970 US

**New Mailing Address:**

P O BOX 1044  
LEHIGH ACRES, FL 33970 US

**FEI Number:** 59-1916769

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DEBOEST, RICHARD  
2030 MCGREGOR BLVD  
FORT MYERS, FL 33901 US

**Name and Address of New Registered Agent:**

SCIACCA, MARIO A  
16 PARKWOOD VILLAS CT.  
LEHIGH ACRES, FL 33936 US

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: MARIO A. SCIACCA

04/13/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: SCIACCA, MARIO  
Address: PO BOX 1044  
City-St-Zip: LEHIGH ACRES, FL 33970

Title: D  
Name: KOSTYK, JOSEPH  
Address: PO BOX 1044  
City-St-Zip: LEHIGH ACRES, FL 33970

Title: DS  
Name: DOROTHY, CRANDALL L  
Address: PO BOX 1044  
City-St-Zip: LEHIGH ACRES, FL 33970

Title: DVP  
Name: FERSTER, JOSEPH  
Address: PO BOX 1044  
City-St-Zip: LEHIGH ACRES, FL 33970

Title: DT  
Name: LEDGER, ANNA T  
Address: PO BOX 1044  
City-St-Zip: LEHIGH ACRES, FL 33970

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: MARIO A. SCIACCA

DP

04/13/2011

Electronic Signature of Signing Officer or Director

Date