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Feb 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 748936 (2)
1. Corporation Name
PARKWOODS VI HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: WOODROSE COURT, P O BOX 6395, FORT MYERS FL 33911
Mailing Address: WOODROSE COURT, P O BOX 6395, FORT MYERS FL 33911

3. Date Incorporated or Qualified: 09/17/1979
4. FEI Number: 59-2169940
Applied For: Not Applicable

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-sections for Suite, Apt. #, etc., City & State, Zip, and Country.

5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent: WESTLAKE, RICHARD, 12353-4 WOODROSE CT, FORT MYERS FL 33907

10. Name and Address of New Registered Agent: LYNAN GRISSINGER, 12363-1 WOODROSE CT., FT. MYERS, FL 33907

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: LYNAN GRISSINGER, President, 1-12-98

12. OFFICERS AND DIRECTORS

TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	VEREEN, PAT	
STREET ADDRESS	12341-3 WOODROSE COURT	
CITY-ST-ZIP	FT MYERS, FL 00000	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	IAMARINO, LOUIS	
STREET ADDRESS	12353-1 WOODROSE CT	
CITY-ST-ZIP	FT MYERS FL	
TITLE	DT	<input checked="" type="checkbox"/> DELETE
NAME	WESTLAKE, RICHARD	
STREET ADDRESS	12353-4 WOODROSE COURT	
CITY-ST-ZIP	FT MYERS FL	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	GRISSINGER, LYANNE	
STREET ADDRESS	12363-1 WOODROSE CT	
CITY-ST-ZIP	FT MYERS FL	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	BRADLEY, KAREN	
STREET ADDRESS	12339-1 WOODROSE CR	
CITY-ST-ZIP	FT MYERS FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	VICKI MASSEY	
1.3 STREET ADDRESS	12361-1 WOODROSE CT	
1.4 CITY-ST-ZIP	FT. MYERS, FL 33907	
2.1 TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	JACK KUSTEK	
2.3 STREET ADDRESS	12353-3 WOODROSE CT.	
2.4 CITY-ST-ZIP	FT. MYERS, FL 33907	
3.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Gretchen Meyers	
3.3 STREET ADDRESS	12365-3 WOODROSE CT	
3.4 CITY-ST-ZIP	FT. MYERS, FL 33907	
4.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Grissinger, Lyanne	
4.3 STREET ADDRESS	Same address.	
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 as an attachment with an address.

SIGNATURE: Lyanne Grissinger 1-12-98

CRE037 (10/97)