

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748936

FILED
Feb 18, 2009
Secretary of State

Entity Name: PARKWOODS VI HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

WOODROSE COURT
FORT MYERS, FL 33911

New Principal Place of Business:

WOODROSE COURT
FORT MYERS, FL 33907

Current Mailing Address:

12369-5 WOODROSE COURT
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 59-2169940 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUSTEK, JACK
12358-3 WOODROSE CT
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

KUSTEK, JOHN
12353-3 WOODROSE CT
FORT MYERS, FL 33907 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: JOHN KUSTEK

02/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: NORRIS, MARILYNN
Address: 12343-1 WOODROSE CT
City-St-Zip: FORT MYERS, FL 33907

Title: P () Delete
Name: KUSTEK, JOHN
Address: 12353-3 WOOD ROSE CT
City-St-Zip: FT MYERS, FL 33907

Title: SD () Delete
Name: WALLIS-KENNEDY, BROOKE
Address: 12369-3 WOODROSE CT
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: KUSTEK, DEBBIE
Address: 12353-3 WOOD ROSE CT
City-St-Zip: FORT MYERS, FL 33907

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KUSTEK, JOHN
Address: 12353-3 WOODROSE CT
City-St-Zip: FORT MYERS, FL 33907

Title: VP (X) Change () Addition
Name: CONDRET, LYNDIA
Address: 12353-2 WOOD ROSE CT
City-St-Zip: FT MYERS, FL 33907

Title: SEC (X) Change () Addition
Name: WALLIS-KENNEDY, BROOKE
Address: 12369-3 WOODROSE CT
City-St-Zip: FORT MYERS, FL 33907

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Change (X) Addition
Name: NORRIS, MARILYNN
Address: 12343-1 WOODROSE COURT
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARILYNN NORRIS

T

02/18/2009

Electronic Signature of Signing Officer or Director

Date