

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90106 015 ****61.25

DOCUMENT # 756303

1. Entity Name
 PARK WAY PLAZA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business *PLEASE REFER TO ENCLOSED NOTE* Mailing Address

810 SATURN ST SUITE #30 JUPITER, FL 33477 US 810 SATURN ST SUITE #30 JUPITER, FL 33477 US

50011412



03212006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2220376 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PETERSON, ERIC G
 154 SIMS CREEK LN
 JUPITER, FL 33458

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GORE, MR. GERAL
STREET ADDRESS	810 SATURN ST. SUITE #28
CITY-ST-ZIP	JUPITER, FL 33477
TITLE	SD
NAME	LUBECK, JOSEPH
STREET ADDRESS	825 PARKWAY ST, STE 3
CITY-ST-ZIP	JUPITER, FL 33477
TITLE	D
NAME	CLEGG, RICHARD
STREET ADDRESS	810 SATURN ST 20
CITY-ST-ZIP	JUPITER, FL 33477
TITLE	D
NAME	THOMPSON, JOAN
STREET ADDRESS	825 PARKWAY ST STE 8
CITY-ST-ZIP	JUPITER, FL 33477
TITLE	TD
NAME	KUHNS, KATHLEEN
STREET ADDRESS	825 PARKWAY ST STE 11
CITY-ST-ZIP	JUPITER, FL 33477
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 3/23/06 561 575 6090

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

50011412
756303

PARKWAY PLAZA COA INC
PO BOX 4416
TEQUESTA, FL 33469
JANUARY 1, 2006

PLEASE BE ADVISED THAT EFFECTIVE IMMEDIATELY ALL CORRESPONDENCE AND
BILLS FOR PARKWAY PLAZA SHOULD BE DIRECTED TO THE ABOVE REFERENCED
PO BOX.

THANK YOU FOR YOUR ATTENTION TO THIS MATTER.

BOARD OF DIRECTORS
PARKWAY PLAZA COA INC