

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # 762169**

1. Entity Name  
PARLIAMENT GOLF VILLAS CONDOMINIUM  
ASSOCIATION, INC.



Principal Place of Business  
123 N CONGRESS AVE  
#132  
BOYNTON BEACH, FL 33426

Mailing Address  
123 N CONGRESS AVE  
#132  
BOYNTON BEACH, FL 33426

2. Principal Place of Business - No P.O. Box #

3. Mailing Address  
*223 Sunset Ave.*

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
*# 110*

City & State

City & State  
*Palm Beach, FL*

Zip

Zip

Country  
*33480*

Country  
*USA*

**FILED  
Apr 14, 2008 8:00 am  
Secretary of State**

04-14-2008 90041 045 \*\*\*\*61.25

**40067630**



03282008 Chg-NP CR2E037 (12/06)

4. FEI Number  
*59-2237456*

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

J.A.N. PROPERTY MGMT INC  
123 N CONGRESS AVE  
BOYNTON BEACH, FL 33426

Name

*LIST MANAGEMENT CO*

Street Address (P.O. Box Number is Not Acceptable)

*223 SUNSET AVE # 110*

City

*PALM BEACH*

FL *33480*

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

*MARTIN LIST*

*MARTIN LIST, ASSN MGR*

*3-31-08*

(NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25  
Due by May 1, 2008**

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

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P  Delete  
NAME GUTTENTAG, SALLY  
STREET ADDRESS 2451 PRESIDENTIAL WAY  
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  Delete  
NAME SCHAFTEL, STUART  
STREET ADDRESS 2435E PRESIDENTIAL WAY  
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE P  Delete  
NAME WALSEY, CHARLES  
STREET ADDRESS 2517 B PRESIDENTIAL WAY  
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  Delete  
NAME SCHAPIRO, HARRIET  
STREET ADDRESS 2501 A PRESIDENTIAL WAY  
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  Delete  
NAME CHIRCHISDO, LEONARD  
STREET ADDRESS 2435 D PRESIDENTIAL WAY  
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP  Delete  
NAME HAAS, JOHN  
STREET ADDRESS 2501 C PRESIDENTIAL WAY  
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:**

*MARTIN LIST*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/1/08*

Daytime Phone #