

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

8/2

FILED
Aug 24, 2006 8:00 am
Secretary of State

08-03-2006 90003 044 ****61.25

DOCUMENT # N00961 1. Entity Name PARKVIEW OF STUART CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1290 SE PARKVIEWPLACE STUART, FL 34994-5516			Mailing Address P.O. BOX 150 STUART, FL 34995		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-2434420	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent BURSON, ROBERT A PA 310 WEST FIRST STREET STUART, FL 34994				7. Name and Address of New Registered Agent Name FIELDS, GARY D. P.A. Street Address (P.O. Box Number is Not Acceptable) Admiralty Tower - Suite 900 4400 PGA Blvd. City Palm Beach Gardens FL Zip Code 33410	
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 8/21/06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee to \$61.25 Due by May 1, 2006		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					
TITLE	P HOSANG, JOHN	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	1250 SE PARKVIEW PLACE, C-L		NAME		
STREET ADDRESS	STUART, FL 34994		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	HANDWERKER, AL		NAME		
STREET ADDRESS	1250 SE PARKVIEW PL., C-9		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34994		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	MCCLURE, SANDY		NAME		
STREET ADDRESS	1250 SE PARKVIEW PLACE C-10		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34994		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE	V.P.	☒ Change ☐ Addition
NAME	DALTON, PRISCILLA		NAME	DALTON, PRISCILLA	
STREET ADDRESS	1250 SE PARKWAY PLACE C-03		STREET ADDRESS	1250 SE PARKWAY PLACE C-03	
CITY-ST-ZIP	STUART, FL 34994		CITY-ST-ZIP	STUART, FL 34994	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: 4/4/06 772-781-7948 SIGNATURE AND TYPED OR PRINTED NAME OF EXEMPTED OFFICER OR DIRECTOR					