

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000048

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** PARKWOOD SQUARE APARTMENTS ASSOCIATION B, INC.

**Current Principal Place of Business:**

5880 38TH AVE. N. 209  
ST. PETERSBURG, FL 33710

**New Principal Place of Business:**

**Current Mailing Address:**

11350 66TH ST. N. 124  
LARGO, FL 33773

**New Mailing Address:**

FEI Number: 59-1808864

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOLIDAY ISLES PROPERTY MANAGEMENT, INC.  
11350 66TH ST. N., STE. 124  
LARGO, FL 33773 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HILBURN, WAYNE R  
Address: 5880 38TH AVE. N., BLDG. #209  
City-St-Zip: ST. PETERSBURG, FL 337101965

Title: ST  
Name: BELL, WILLIAM  
Address: 5880 38TH AVE. N., BLDG. #209  
City-St-Zip: ST. PETERSBURG, FL 337101965

Title: VP  
Name: REVILLA, PEDRO  
Address: 5880-104 38TH AVE N #104  
City-St-Zip: SAINT PETERSBURG, FL 33710

I hereby 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 all other like empowered.

SIGNATURE: WAYNE HILBURN

P

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date