

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 27, 2007
Secretary of State**

DOCUMENT# N06288

Entity Name: PARKVIEW-OF-NAPLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1100 3RD STREET SOUTH
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

745-12TH AVENUE SOUTH
SUITE AA
NAPLES, FL 34102

New Mailing Address:

FEI Number: 59-2765954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE PROPERTY MANAGEMENT INC
745-12TH AVENUE SOUTH
SUITE AA
NAPLES, FL 34102 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: PD () Delete
Name: SANFORD, EARL
Address: 1100 3RD STREET SOUTH
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: BARGAR, ROBERT
Address: 1100 3RD STREET SOUTH
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: FARRELL, JOHN
Address: 1100 3RD STREET SOUTH
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: FITZMAURICE, BARBARA
Address: 1100 3RD STREET SOUTH
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: EARL SANFORD

P

04/27/2007

Electronic Signature of Signing Officer or Director

Date