

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 05, 2008 8:00 am
Secretary of State

03-05-2008 90032 037 ****70.00

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1. Entity Name

PARKWOOD VILLAGE, INC.



Principal Place of Business

515 MAGNOLIA LANE
WILDWOOD FL 34785
US

Mailing Address

515 MAGNOLIA LANE
WILDWOOD FL 34785
US



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-2828984

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARHORST, CARL
708 IRONWOOD LANE
WILDWOOD FL 34785

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: 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 PD ☐ Delete
NAME BARHORST, CARL
STREET ADDRESS 708 IRONWOOD ALNE
CITY-ST-ZIP WILDWOOD FL 34785

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME SALERNO, AL
STREET ADDRESS 704 MAGNOLIA LN
CITY-ST-ZIP WILDWOOD FL 34785

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME CALISSI, DONNA
STREET ADDRESS 600 LIVE OAK LN
CITY-ST-ZIP WILDWOOD FL 34785

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Delete
NAME CARR, CAROL
STREET ADDRESS 611 IRONWOOD LANE
CITY-ST-ZIP WILDWOOD FL 34785

TITLE ☒ Change ☐ Addition
NAME SD
STREET ADDRESS Poates, Joanne
CITY-ST-ZIP 515 Live Oak Lane
Wildwood, FL 34785

TITLE D ☐ Delete
NAME KOPKO, PATRICIA
STREET ADDRESS 605 IRON WOOD LANE
CITY-ST-ZIP WILDWOOD FL 34785

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME PERRY, CLINT
STREET ADDRESS 706 LIVE OAK LANE
CITY-ST-ZIP WILDWOOD FL 34785

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS CONGDON, JASIE
CITY-ST-ZIP 607 LIVE OAK LANE
WILDWOOD, FL 34785

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: CARL BARHORST *Carl Barhorst* 2-18-08 352/748-5423