

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14826

FILED
Feb 17, 2011
Secretary of State

Entity Name: PARKWOOD VILLAGE, INC.

Current Principal Place of Business:

704 MAGNOLIA LANE
WILDWOOD, FL 34785 US

New Principal Place of Business:

Current Mailing Address:

704 MAGNOLIA LANE
WILDWOOD, FL 34785 US

New Mailing Address:

FEI Number: 59-2828984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALERNO, ALFONSO
704 MAGNOLIA LANE
WILDWOOD, FL 34785 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
Name: SALERNO, ALFONSO
Address: 704 MAGNOLIA LANE
City-St-Zip: WILDWOOD, FL 34785

Title: VPD
Name: KOPKO, PATRICIA
Address: 517 IRONWOOD LANE
City-St-Zip: WILDWOOD, FL 34785

Title: TD
Name: BARHORST, JOANN
Address: 708 IRONWOOD LANE
City-St-Zip: WILDWOOD, FL 34785

Title: SD
Name: POATES, JOANNE
Address: 515 LIVE OAK LANE
City-St-Zip: WILDWOOD, FL 34785

Title: D
Name: CONGDON, JOSIE
Address: 607 LIVE OAK LANE
City-St-Zip: WILDWOOD, FL 34785

Title: D
Name: MESSENGER, DEAN
Address: 712 LIVE OAK LANE
City-St-Zip: WILDWOOD, FL 34785

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: JOANNE POATES

SD

02/17/2011

Electronic Signature of Signing Officer or Director

Date