


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 17, 2008 08:00 A**  
**Secretary of State**


**DOCUMENT # N16236**

1. Entity Name  
**THE PARKSTONE CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business <b>3239 HENDERSON BLVD.          C/O MICHAEL E. URETTE          TAMPA, FL 33609</b>	Mailing Address <b>3239 HENDERSON BLVD.          C/O MICHAEL E. URETTE          TAMPA, FL 33609</b>
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**DO NOT WRITE IN THIS SPACE**



02142008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-3557254</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**URETTE, MICHAEL E.  
 3239 HENDERSON BLVD.  
 TAMPA, FL 33609**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD URETTE, MICHAEL E. 3239 HENDERSON BLVD. TAMPA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD URETTE, KAREN G. 3239 HENDERSON BLVD. TAMPA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HOOD, TARA URETTE 3239 HENDERSON BLVD. TAMPA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP URETTE, GARRISON B 3239 HENDERSON BLVD TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 04/02/08-80093-012 61.25

**DO NOT WRITE IN THIS SPACE**

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:** *Michael E. Urette* **3/13/08** **813.876.7838**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **MICHAEL E. URETTE** Date: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_