

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26667

FILED  
Mar 15, 2008  
Secretary of State

Entity Name: PARKVIEW PLACE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1091 NEW PARKVIEW PLACE  
WEST PALM BEACH, FL 33417 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 222604  
WEST PALM BEACH, FL 33417 US

**New Mailing Address:**

FEI Number: 65-0101408

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEWART, JOHN F  
1091 NEW PARKVIEW PLACE  
HAVERHILL, FL 33417 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: EDEN, CHRIS  
Address: PO BOX 222604  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: VTD ( ) Delete  
Name: STEWART, JOHN  
Address: 1040 NEW PARKVIEW PLACE  
City-St-Zip: HAVERHILL, FL 33417

Title: SD ( ) Delete  
Name: DEMAGGIO, SUSAN  
Address: 1150 NEW PARKVIEW PLACE  
City-St-Zip: HAVERHILL, FL 33417

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: HALL, SONJA  
Address: 1040 NEW PARKVIEW PLACE  
City-St-Zip: WEST PALM BEACH, FL 33417

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

Title: SD (X) Change ( ) Addition  
Name: YATES, JEANEL  
Address: 1000 NEW PARKVIEW PLACE  
City-St-Zip: HAVERHILL, FL 33417

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: JOHN STEWART

Electronic Signature of Signing Officer or Director

VTD

03/15/2008

Date