2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2010
Secretary of State

DOCUMENT# N32478

Entity Name: PARKER LAKES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD STE 200
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD STE 200
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 59-2953172 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD
SUITE 200
FORT MYERS, FL 33919 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: CONRAD, JOHN
Address: 9361 ALAMANDER CT. #408
City-St-Zip: FORT MYERS, FL 33919

Title: SD
Name: DANGEL, MANFRED
Address: 15030 BRIDGEWAY LN #501
City-St-Zip: FORT MYERS, FL 33919

Title: TD
Name: KUNZ, DOROTHY
Address: 9321 WATER LILY CT. #703
City-St-Zip: FORT MYERS, FL 33919

Title: D
Name: WADE, ARVIN
Address: 9190 CLOVE CT.
City-St-Zip: FT. MYERS, FL 33919

Title: D
Name: SHEA, LINDA
Address: 15021 BRIDGEWAY LANE #1204
City-St-Zip: FT. MYERS, FL 33919

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: DOROTHY KUNZ TD 03/30/2010

Electronic Signature of Signing Officer or Director Date