## 2007 NOT-FOK-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # N39400** 

1. Entity Name PARKER PLACE ASSOCIATION, INC.

Principal Place of Business

Mailing Address

7257 NW 4TH BLVD

PMB 320

GAINESVILLE, FL 32607

7257 NW 4TH BLVD

PMB 320

GAINESVILLE, FL 32607

02082007 No Chg-NP

CR2E037 (4/06)

**FILED** 

Mar 26, 2007 08:00 AM Secretary of State

4. FEI Number 59-3046415

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SOUTHERN, EDWARD P 13103 SW 31ST AVE.

## DO NOT WRITE

ARCHER,	FL 32618		,1	IN T	THIS SPACE
	named entity submits this statement for the ions of registered agent.	purpose of changing its registered of	fice or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and little	sif applicable (NOTE: Registered Agen	l signature	required when reins(a(ing)	DATE .
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financing     Trust Fund Contribution.		\$5.00 May Be Added to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE BM CARSWELL, SARA 3229 SW 129TH TERR ARCHER, FL 32618	CTORS			Unnanacoasa 4
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BDM LEWIS, GRETA 3019 SW 130TH TERR ARCHER, FL 32618		U00000680224 04/03/07-80068-007 61.25 <b>DO NOT WRITE</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOUTHERN, EDWARD 13103 SW 31ST AVENUE ARCHER, FL 32618				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM HOEHN, BILL 2906 S.W. 130TH TERRACE ARCHER, FL 32618		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

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.

CITY-ST-ZIP

Daytime Phone #