

FILE NOW: FILING FEE IS \$61.25

FILED

Jun 03 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # **N43594** (3)

1. Corporation Name

PARKWOOD VI ASSOCIATION INC.

Principal Place of Business

Mailing Address

6574 N. STATE RD 7
SUITE 354
COCONUT CREEK FL 33073
US

6574 N. STATE RD 7
SUITE 354
COCONUT CREEK FL 33073-3625
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/28/1991		3a. Date of Last Report 07/22/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0277623		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent

AIKENS, ROBERT
4233 N.W. 66TH DRIVE
COCONUT CREEK FL 33073

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Robert Aikens

(NOTE: Registered Agent signature required when reinstating)

May 15, 1997

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	DVP
NAME	BESECCO, FRANK	1.2 NAME	BIBELLO FRANK
STREET ADDRESS	6634 NW 42ND AVE	1.3 STREET ADDRESS	6632 N.W. 42 AVE
CITY-ST-ZIP	COCONUT CREEK FL	1.4 CITY-ST-ZIP	COCONUT CREEK, FL.
TITLE	DS	2.1 TITLE	DS
NAME	CASTANEDA, ARMANDO	2.2 NAME	Stefanie D. Avanzo
STREET ADDRESS	4273 NW 66TH DR	2.3 STREET ADDRESS	4213 NW 66 DR
CITY-ST-ZIP	COCONUT CREEK FL	2.4 CITY-ST-ZIP	COCONUT CREEK FL 33073
TITLE	DVP	3.1 TITLE	DI
NAME	TATUM, ELIZABETH	3.2 NAME	NORMAN L. FOWLER JR
STREET ADDRESS	4202 NW 66 DRIVE	3.3 STREET ADDRESS	4223 NW 66 DRIVE
CITY-ST-ZIP	COCONUT CREEK FL	3.4 CITY-ST-ZIP	COCONUT CREEK, FL 33073
TITLE	DT	4.1 TITLE	
NAME	AIKENS, ROBERT	4.2 NAME	
STREET ADDRESS	4233 N.W. 66 DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	COCONUT CREEK FL 33073	4.4 CITY-ST-ZIP	
TITLE	DP	5.1 TITLE	
NAME	HARTI, COLETTE	5.2 NAME	
STREET ADDRESS	6614 NW 42 TERRACE	5.3 STREET ADDRESS	
CITY-ST-ZIP	COCONUT CREEK FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert Aikens ROBERT T. AIKENS

CR2E037 (9/96)