

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED 017

May 01, 2007 08:00 A
Secretary of State

DOCUMENT # N46686

1. Entity Name
PARK CENTRAL PROPERTY OWNERS' ASSOCIATION,
INC.



Principal Place of Business

12765 W. FOREST HILL BLVD.
SUITE 1307
WELLINGTON, FL 33414

Mailing Address

12765 W. FOREST HILL BLVD.
SUITE 1307
WELLINGTON, FL 33414



04182007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3103490

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JEFFREY A. DEUTCH, P.A.
7777 GLADES ROAD
SUITE 300
BOCA RATON, FL 33434

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME GILES, RICHARD P
STREET ADDRESS 12765 W. FOREST HILL BLVD., SUITE 1307
CITY-ST-ZIP WELLINGTON, FL 33414

TITLE VP
NAME GAZIANO, BARBARA
STREET ADDRESS 12765 W. FOREST HILL BLVD., SUITE 1307
CITY-ST-ZIP WELLINGTON, FL 33414

TITLE S
NAME HARDIMAN, JENNIFER
STREET ADDRESS 12765 W. FOREST HILL BLVD., SUITE 1307
CITY-ST-ZIP WELLINGTON, FL 33414

TITLE
NAME
STREET ADDRESS
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

UD00000752489

05/21/07-80018-015 70.00

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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas J Keady

4/26/07

561-333-3669

Date

Daytime Phone #