

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003333

FILED
Jan 08, 2009
Secretary of State

Entity Name: PARKWOOD ESTATES R.O.C., INC.

Current Principal Place of Business:

2900 GULF-TO-BAY BLVD.
CLEARWATER, FL 337594220 US

New Principal Place of Business:

Current Mailing Address:

2900 GULF-TO-BAY BLVD.
CLEARWATER, FL 337594220 US

New Mailing Address:

FEI Number: 59-3254865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P A
2401 WEST BAY DRIVE
STE 414
LARGO, FL 33770 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: BLAIR, JAMES
Address: 2900 GULF TO BAY BLVD LOT 104
City-St-Zip: CLEARWATER, FL 337594220

Title: TD () Delete
Name: MELKVIK, ERNEST J
Address: 2900 GULF-TO-BAY BLVD., LOT 127
City-St-Zip: CLEARWATER, FL 337594220

Title: S () Delete
Name: ERVIN, BARBARA
Address: 2900 GULF TO BAY BLVD, LOT 115
City-St-Zip: CLEARWATER, FL 337594220

Title: D () Delete
Name: LUDWIG, MARLIN
Address: 2900 GULF-TO-BAY BLVD., LOT 219
City-St-Zip: CLEARWATER, FL 337594220

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D () Change (X) Addition
Name: MARRIER, BARBARA
Address: 2900 GULF TO BAY BLVD.
City-St-Zip: CLEARWATER, FL 337594220 US

Title: D () Change (X) Addition
Name: PETERSEN, RICHARD
Address: 2900 GULF TO BAY BLVD.
City-St-Zip: CLEARWATER, FL 337594220 US

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: JAMES BLAIR

PRES

01/08/2009

Electronic Signature of Signing Officer or Director

Date