

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90021 048 ****61.25

DOCUMENT # N96000000590

1. Entity Name

PARKWAY NORTH COMMUNITY ASSOCIATION, INC.

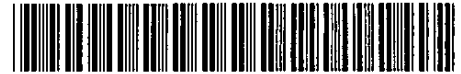


Principal Place of Business

P.O. BOX 15654
FERNANDINA BEACH FL 32035
US

Mailing Address

P.O. BOX 15654
FERNANDINA BEACH FL 32035
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3373265

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

MORTENSEN, CHARLES A
4400 TITLEIST DR
FERNANDINA BEACH FL 32034

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME ANDREW, LINDA
STREET ADDRESS 1559 CANOPY DR
CITY-STATE-ZIP FERNANDINA BEACH FL 32034

TITLE D ☐ Delete
NAME HIGGINS, GARY
STREET ADDRESS 1543 CANOPY DR.
CITY-STATE-ZIP FERNANDINA BEACH FL 32034

TITLE TD ☐ Delete
NAME MORTENSEN, CHARLES
STREET ADDRESS 4400 TITLEIST DR
CITY-STATE-ZIP FERNANDINA BEACH FL 32034

TITLE SD ☒ Delete
NAME CHERRY, SYLVIA
STREET ADDRESS 4407 TITLEIST DR
CITY-STATE-ZIP FERNANDINA BEACH FL 32034

TITLE VP ☐ Delete
NAME CALLAHAN, DICK
STREET ADDRESS 4423 TITLEIST DRIVE
CITY-STATE-ZIP FERNANDINA BEACH FL 32034

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE SD Secretary ☐ Change ☒ Addition
NAME Becky Carter
STREET ADDRESS 1578 Canopy Drive
CITY-STATE-ZIP Fernandina Beach, FL 32034

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE Ken Fusch D ☐ Change ☒ Addition
NAME
STREET ADDRESS 4431 Titleist Drive
CITY-STATE-ZIP Fernandina Beach, FL 32034

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: *Charles A. Mortensen*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/07 904-321-2749
Date Date/Time Phone #