

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000590

FILED  
Jan 10, 2009  
Secretary of State

Entity Name: PARKWAY NORTH COMMUNITY ASSOCIATION, INC.

## Current Principal Place of Business:

P.O. BOX 15654  
FERNANDINA BEACH, FL 32035 US

## New Principal Place of Business:

4400 TITLEIST DRIVE  
FERNANDINA BEACH, FL 32034 US

## Current Mailing Address:

P.O. BOX 15654  
FERNANDINA BEACH, FL 32035 US

## New Mailing Address:

FEI Number: 59-3373265      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORTENSEN, CHARLES A  
4400 TITLEIST DR  
FERNANDINA BEACH, FL 32034 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: FARNSWORTH, GARY  
Address: 4439 TITLEIST DRIVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: DVP ( ) Delete  
Name: ANDREW, LINDA  
Address: 1559 CANOPY DRIVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: TD ( ) Delete  
Name: MORTENSEN, CHARLES  
Address: 4400 TITLEIST DR  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: SD ( ) Delete  
Name: CZRTER, BECKY  
Address: 1578 CANOPY DR  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D ( ) Delete  
Name: MCEWEN, SUSAN  
Address: 1550 CANOPY DRIVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

## 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: D (X) Change ( ) Addition  
Name: CARTER, BECKY  
Address: 1578 CANOPY DR  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: SD (X) Change ( ) Addition  
Name: MCEWEN, SUSAN  
Address: 1550 CANOPY DRIVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

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: CHARLES A MORTENSEN

TREA

01/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date