## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #

N96000002056 (7)

B. W. OF PARKER LAKES NEIGHBORHOOD ASSOCIATION,

Principal Place of Business

Mailing Address

## **FILED** May 20 1997 8:00am Secretary of State



6296 CORPORATE COURT, SUITE A101 FORT MYERS FL 33919		6296 CORPORATE COURT, SUITE A101 FORT MYERS FL 33919-3535					
					3. Date Incorporated or Qualified 04/16/1996	3a. Date of La	st Report
· · · · · · · · · · · · · · · · · · ·					4. FEI Number		Applied For
O Marquis Management, Inc. C\O Marquis Manage			Manager	ment Inc	65-0729 73		Not Applicable
661 New Brittany Blvd. 12661 New Brittany I			_		5. Certificate of Status Desired	1 7 7 7 7	75 Additional e Required
rt Myers,	Fl. 33907	Fort Myers, F	l. 3 <b>39</b> 07		<ol><li>Etection Campaign Financing Trust Fund Contribution</li></ol>		00 May Be ded to Fees
<b>-</b>	_	<del></del> -	<b>—</b>	· ·	8. This corporation has liability for in		ler s. 199.032,
<u>4 </u>	25 9. Name and Address of Cu	29	30	1		Yes No	
····	9, NEME SHO Address of Co	nteur wedisteled Wasir		81 Stile	10. Name and Address of New Reg Then, Peter	liaresed wheel	
N IOONE	o étrouru i			, , -	•	<u> </u>	
	ER, STEPHEN L 100 ONE TAMBA CITY CEN	ITED WHII DING		1 1	quis Management, Inc.		
	1 <mark>00, one tam</mark> pa city cen Fl <b>836</b> 01	ITEN BUILDING		B3 1260	61 New Brittany Blvd.		
IAMEA	TL 030VI			Fort	Myers, Fl. 33907		
¥.	 इ			84		85	Zip Code
i. Pursuant I	to the provisions of Sections 617	.0502 and 617,1508, Flori	ida Statutes.	the above-named	corporation submits this statement for the po	urpose of changi	ng its registered
office or re	egistered agent, or both, in the s	State of Florida, Such char	nge was auth	orized by the corp	corporation submits this statement for the protection's board of directors. I hereby accep	t the appointmen	it as registered
	The Acception	A CALL	PCTer	STIL	PHEN 3/27	197	
SIGNATURE _	Signature, typed or printed name of registers	a agent and title if applicable.	_ ,		required when reinstating)	DATE	
12.		AND DIRECTORS	·	13.	ADDITIONS/CHANGES TO OFFICE		TORS IN 12
TITLE	PD		ELETE	1.1 TITLE		☐ Char	TORS IN 12 nge Addition
NAME ]	REISMAN, JOHN			1.2 NAME			) ;
STREET ADDRESS	6296 CORPORATE COUR	RT, SUITE A101		1.3 STREET ADDRESS			
CITY-ST-ZIP	FORT MYERS FL 33919			1.4 CITY-ST-2IP			
TITLE	VD		ELETE	2.1 TITLE		Chai	nge 🔲 Addition (
NAME	<b>GULLO, VINCE</b>			2.2 NAME			
STREET ADDRESS	6296 CORPORATE COUR	RT, SUITE A101		2.3 STREET ADDRESS			
CITY-ST-ZIP	FORT MYERS FL 33919		,	2. 4 CITY-ST-ZIP			
TITLE	STD	X D	ELETE ,	3.1 TITLE	Knizner, David STU 9400 Eladio lus Dr SHEZ. Ft Mfrs F2 339 08	Cha	nge Addition
NAME	DAVIDSON, SUE			3.2 NAME	Knizner, David	***	Ţ
STREET ADDRESS	6296 CORPORATE COU	IT, SUITE A101		3.3 STREET ADDRESS	9400 Chidio lus Dr STEC.	30	
CITY-ST-ZIP	FORT MYERS FL 33919			3.4 CITY-ST-ZIP	F+ Mgrs F2 339 08	2	
TITLE		L.J D	ELETE	4.1 TITLE	ů	☐ Cha	nge L Addition
NAME				4. 2 NAME	•		
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP		——————————————————————————————————————	ELEXE.	4.4 CITY-ST-ZIP		[ ] Ob-	T Zaan
TITLE		□ U	ELETE	5.1 TITLE	·	∟ Cha	nge L Addition
NAME				5.2 NAME		c	5
STREET ADDRESS				5.3 STREET ADDRESS		6	180/97
CITY-ST-ZIP			ELETE	5.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	☐ Cha	
TITLE	•	U U	CLEIE	6.1 TITLE			ingo L MOUSIUII
NAME :	•		(	6.2 NAME			ا ہے۔ ا
STREET ADDRESS		(	)	6.3 STREET ADDRESS		Dep 6	0100
CITY-ST-ZIP	w cartify that the information ever	antied with the filing does	not qualify fo	6.4 CITY-ST-ZIP	ated in Section 119.07(3)(i), Florida Statutes	L further certify	that the
Information	n indicated on this annual reper	t or supplemental annual.	eport is true	and accurate and	that my signature shall have the same legal eport as required by Chapter 617, Florida St	effect as if made	e under oath; that