

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000002385

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** PARKVIEW HOMEOWNERS ASSOCIATION OF DEBARY, INC.

**Current Principal Place of Business:**

392 MAGNOLIA SPRINGS COURT  
DEBARY, FL 32713

**New Principal Place of Business:**

**Current Mailing Address:**

392 MAGNOLIA SPRINGS COURT  
DEBARY, FL 32713

**New Mailing Address:**

**FEI Number:** 59-3442752

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PRETHER, JANET  
11 SPRING RIDGE DRIVE  
DEBARY, FL 32713 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:** P  
**Name:** MONTGOMERY, WES  
**Address:** 398 PINE SPRINGS DRIVE  
**City-St-Zip:** DEBARY, FL 32713

**Title:** V  
**Name:** SCHISANO, JOSEPH  
**Address:** 367 PINE SPRINGS DRIVE  
**City-St-Zip:** DEBARY, FL 32713

**Title:** S  
**Name:** PRETHER, JANET  
**Address:** 11 SPRING RIDGE DR  
**City-St-Zip:** DEBARY, FL 32713

**Title:** T  
**Name:** FOURNIER, NICOLE  
**Address:** 392 MAGNOLIA SPRINGS COURT  
**City-St-Zip:** DEBARY, FL 32713

I hereby 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 all other like empowered.

**SIGNATURE:** NICOLE FOURNIER

TREA

04/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date