

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000003921

1. Corporation Name

GRAND VIEW OF PARKER LAKES ONE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

9400 GLADIOLUS DR
SUITE 100
FT. MYERS FL 33908
US

Mailing Address

9400 GLADIOLUS DR
SUITE 100
FT. MYERS FL 33908
US

2. Principal Place of Business

2a. Mailing Address

MARQUIS MANAGEMENT
9400 GLADIOLUS DR SUITE 100
FORT MYERS, FL. 33908

c/o MARQUIS MANAGEMENT
9400 GLADIOLUS DR SUITE 100
FORT MYERS, FL. 33908

3. Date Incorporated or Qualified

07/09/1997

4. FEI Number

65-0768267

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

STILPHEN, PETER
C/O MARQUIS MANAGEMENT INC
9400 GLADIOLUS DR SUITE 100
FT MYERS FL 33908

10. Name and Address of New Registered Agent

MICHAEL FLEMING c/o
MARQUIS MANAGEMENT INC.
9400 GLADIOLUS DR. SUITE 100
FORT MYERS, FL. 33908

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DP	REISMAN, JOHN	9400 GLADIOLUS DR., STE. 250	FT. MYERS FL 33908	<input checked="" type="checkbox"/>
DV	GULLO, VINCE	9400 GLADIOLUS DR., STE. 250	FT. MYERS FL 33908	<input checked="" type="checkbox"/>
DST	KNIZNER, DAVE	9400 GLADIOLUS DR., STE. 250	FT. MYERS FL 33908	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
PD	CRYSER, William	14990 Vista View Way #102	Fort Myers, FL. 33919	<input type="checkbox"/>	<input type="checkbox"/>
VD	Hanson, Mary Ellen	14981 Vista View Way #1103	Fort Myers, FL. 33919	<input type="checkbox"/>	<input type="checkbox"/>
STD	Johnson, Michael	14980 Vista View Way #204	Fort Myers, FL. 33919	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William Cryster* SIGNATURE: *Michael Fleming* DATE: *4-24-99* DAYTIME PHONE: *941-466-4445*

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Secretary of State

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