

# 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

<b>DOCUMENT # N98000002370</b> 1. Entity Name <b>PARKLAND ISLES HOMEOWNER'S ASSOCIATION, INC.</b>			
Principal Place of Business <del>C/O PRIME MGMT GROUP</del> <del>6300 PARK OF COMMERCE BLVD.</del> <del>BOCA RATON, FL 33487</del>		Mailing Address <del>C/O PRIME MGMT GROUP</del> <del>6300 PARK OF COMMERCE BLVD.</del> <del>BOCA RATON, FL 33487</del>	
2. Principal Place of Business - No P.O. Box # <b>11784 W. Sample Rd</b> Suite, Apt. #, etc. <b>#103</b>		3. Mailing Address <b>11784 W. Sample Rd</b> Suite, Apt. #, etc. <b>#103</b>	
City & State <b>Coral Springs, FL</b> Zip <b>33065</b> Country <b>USA</b>		City & State <b>Coral Springs, FL</b> Zip <b>33065</b> Country <b>USA</b>	
4. FEI Number <b>65-0839846</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent <del>EISENBERG, BROWN, LEWIS AND FRANKEL P.A.</del> <del>4000 HOLLYWOOD BLVD.</del> <del>HOLLYWOOD, FL 33021</del>		7. Name and Address of New Registered Agent Name <b>United Community Mgt. Corp</b> Street Address (P.O. Box Number is Not Acceptable) <b>11784 W. Sample Rd #103</b> City <b>CORAL SPRINGS FL</b> Zip Code <b>33065</b>	
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 <u><i>K. Webster</i></u> <b>Debbie K. Webster V.P. Finance, United Comm 5/1/08</b> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>Amended AR is \$61.25</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	T MERRICK, JASON 6390 NW 110TH AVE PARKLAND, FL 33076	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	P WEBSTER, KENNETH 7235 NW 110TH AVE PARKLAND, FL 33076	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D RUELLE, MARK 6842 NW 108 AVE PARKLAND, FL 33076	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	V FERMANIAN, MARC 10633 N.W. 62 CT. PARKLAND, FL 33076	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	S LITVIN, LAURENCE 10640 N.W. 62ND CT. PARKLAND, FL 33076	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.			
<b>SIGNATURE:</b> <u><i>K. Webster</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			
		Date _____ Daytime Phone # _____	

FILED

08 MAY -7 AM 9:08

STATE  
TALLAHASSEE, FLORIDA



03112008 Chg-NP CR2E037 (12/06)

4. FEI Number 65-0839846 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name United Community Mgt. Corp  
Street Address (P.O. Box Number is Not Acceptable)

11784 W. Sample Rd #103  
City CORAL SPRINGS FL Zip Code 33065

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SIGNATURE *K. Webster* **Debbie K. Webster V.P. Finance, United Comm 5/1/08**  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is \$61.25  
 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

T  
MERRICK, JASON  
6390 NW 110TH AVE  
PARKLAND, FL 33076

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

P  
WEBSTER, KENNETH  
7235 NW 110TH AVE  
PARKLAND, FL 33076

D  
RUELLE, MARK  
6842 NW 108 AVE  
PARKLAND, FL 33076

V  
FERMANIAN, MARC  
10633 N.W. 62 CT.  
PARKLAND, FL 33076

S  
LITVIN, LAURENCE  
10640 N.W. 62ND CT.  
PARKLAND, FL 33076

300129597113  
05/15/08--01026--005 \*\*61.25

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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SIGNATURE: *K. Webster*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_