


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90278 006 ****61.25

DOCUMENT # N98000003689

1. Entity Name
PARKSTONE COMMUNITY ASSOCIATION, INC.



Principal Place of Business
165 W SR 434
WINTER SPRINGS, FL 32708 US

Mailing Address
~~PO BOX 915322~~
~~LONGWOOD, FL 32791 US~~

60027521



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
PO BOX 19703
 Suite, Apt. #, etc.

04102006 Chg-NP CR2E037 (11/05)

City & State
WINTER SPRINGS . FL

4. FEI Number
59-3578903

Applied For
 Not Applicable

Zip
32719

Country
US

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

6. Name and Address of Current Registered Agent
NATIONAL ASSOCIATION MANAGEMENT CO.
165 W. STATE ROAD 434
WINTER SPRINGS, FL 32708

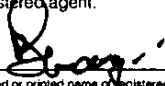
7. Name and Address of New Registered Agent

Name
EPM SERVICES

Street Address (P.O. Box Number is Not Acceptable)
165 W. STATE ROAD 434

City
WINTER SPRINGS FL Zip Code
32708

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  DATE **04/11/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MAI, JOHN 1243 STONE HARBOUR RD WINTER SPRINGS, FL 32708	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMITH, LISA 120 WINDSOR CRESENT ST WINTER SPRINGS, FL 32808	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WENTZ, JAMES 105 WINDSOR CRESENT ST WINTER SPRINGS, FL 32708	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALL, LINDSEY 290 TAVESTOCK LOOP WINTER SPRINGS, FL 32708	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, CHRIS 226 TAVESTOCK LOOP WINTER SPRINGS, FL 32708	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SMITH, NEAL 292 TAVESTOCK LOOP WINTER SPRINGS, FL 32708	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RON PETERSON 1235 STONE HARBOUR ROAD WINTER SPRINGS, FL 32708	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRENT GREGORY 1231 STONE HARBOUR ROAD WINTER SPRINGS, FL 32708	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RODNEY BEASLEY 1241 STONE HARBOUR ROAD WINTER SPRINGS, FL 32708	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAL SMITH 430 SANDRINGHAM CT. WINTER SPRINGS, FL 32708	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRIS BROWN 752 TAVESTOCK LOOP WINTER SPRINGS, FL 32708	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NEAL SMITH 292 TAVESTOCK LOOP WINTER SPRINGS, FL 32708	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE:  **RODNEY BEASLEY** DATE: **4/10/06** DAYTIME PHONE #: **(407) 327-5824**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR