

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

DOCUMENT# N99000001381

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** PARK PLACE COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

627 PARK FOREST COURT  
APOPKA, FL 32703 US

**New Principal Place of Business:**

**Current Mailing Address:**

627 PARK FOREST COURT  
APOPKA, FL 32703 US

**New Mailing Address:**

**FEI Number:** 59-3578385

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEVENS, DARLENE  
627 PARK FOREST COURT  
APOPKA, FL 32703 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: VP  
Name: JEFF, POSTELL  
Address: 631 PARK FOREST  
City-St-Zip: APOPKA, FL 32703 US

Title: S  
Name: KOERTH, JOHN  
Address: 635 PARK FOREST CT  
City-St-Zip: APOPKA, FL 32703 US

Title: T  
Name: STEVENS, DARLENE  
Address: 627 PARK FOREST COURT  
City-St-Zip: APOPKA, FL 32703 US

Title: P  
Name: PRUITT, RON  
Address: 630 PARK FOREST COURT  
City-St-Zip: APOPKA, FL 32703

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: LORI COLLIER

MS

04/13/2012

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

\_\_\_\_\_  
Date