2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2025
Secretary of State
9234822865CC

DOCUMENT# 722868

Entity Name: PARKVIEW EAST OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O PMI CAPSTONE
8588 POTTER PARK DR SUITE 500
SARASOTA, FL 34238

Current Mailing Address:

C/O PMI CAPSTONE
8588 POTTER PARK DR SUITE 500
SARASOTA, FL 34238 US

FEI Number: 59-1506859

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PMI CAPSTONE
C/O PMI CAPSTONE
8588 POTTER PARK DR SUITE 500
SARASOTA, FL 34238 US

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: REBEKAH SVOBODA 03/13/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	SECRETARY
Name	VITATOE, JAMES	Name	PERO, BRENDA
Address	C/O PMI CAPSTONE 8588 POTTER PARK DR SUITE 500	Address	C/O PMI CAPSTONE 8588 POTTER PARK DR SUITE 500
City-State-Zip:	SARASOTA FL 34238	City-State-Zip:	SARASOTA FL 34238
Title	TREASURER	Title	ASST. TREASURER
Name	TERRELL, BAKER	Name	GOLDEN, CATHERINE
Address	C/O PMI CAPSTONE 8588 POTTER PARK DR SUITE 500	Address	C/O PMI CAPSTONE 8588 POTTER PARK DR SUITE 500
City-State-Zip:	SARASOTA FL 34238	City-State-Zip:	SARASOTA FL 34238
Title	VP		
Name	COUNTRYMAN, STEPHANIE		
Address	C/O PMI CAPSTONE 8588 POTTER PARK DR SUITE 500		
City-State-Zip:	SARASOTA FL 34238		

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: JAMES VITATOE PRESIDENT 03/13/2025

Electronic Signature of Signing Officer/Director Detail — Date