

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741378

Entity Name: PARK VIEW II CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 18, 2020
Secretary of State
4951683295CC

Current Principal Place of Business:

C/O AMERICAN CONDO MGMT
4223 DEL PRADO BLVD S
CAPE CORAL, FL 33904

Current Mailing Address:

C/O AMERICAN CONDO MGMT
PO BOX 100399
CAPE CORAL, FL 33910 US

FEI Number: 59-1897057

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KASE, SUSAN
AMERICAN CONDO MANAGEMENT
4223 DEL PRADO BLVD S
CAPE CORAL, FL 33904 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: SUSAN KASE

03/18/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name JORDAN, LYNNE
Address C/O AMERICAN CONDO MGMT
 PO BOX 100399
City-State-Zip: CAPE CORAL FL 33910

Title SECRETARY
Name YERKES, LINDA
Address C/O AMERICAN CONDO MGMT
 PO BOX 100399
City-State-Zip: CAPE CORAL FL 33910

Title PRESIDENT
Name ROSBOROUGH, SUZANNE
Address C/O AMERICAN CONDO MGMT
 P.O BOX 100399
City-State-Zip: CAPE CORAL FL 33910

Title VP
Name WARINGER, BARBARA
Address C/O AMERICAN CONDO MGMT
 PO BOX 100399
City-State-Zip: CAPE CORAL FL 33910

Title DIRECTOR
Name FORAN, BRIAN
Address C/O AMERICAN CONDO MGMT
 PO BOX 100399
City-State-Zip: CAPE CORAL FL 33910

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: SUZANNE ROSBOROUGH

PRESIDENT

03/18/2020

Electronic Signature of Signing Officer/Director Detail

Date