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: EDITH KARRAKER
PRESIDENT
01/21/2020

Electronic Signature of Signing Officer/Director Detail

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT
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## DOCUMENT# 767823

Entity Name: PARKSIDE VILLAS HOMEOWNERS ASSOCIATION, INC.

### **Current Principal Place of Business:**

QUALIFIED PROPERTY MANAGEMENT 5901 US HWY 19 SUITE 7Q NEW PORT RICHEY, FL 34652

### **Current Mailing Address:**

QUALIFIED PROPERTY MANAGEMENT 5901 US HWY 19 SUITE 7Q NEW PORT RICHEY, FL 34652 US

## FEI Number: 59-2377593

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

QUALIFIED PROPERTY MANAGEMENT QUALIFIED PROPERTY MANAGEMENT 5901 US HWY 19 SUITE 7Q NEW PORT RICHEY, FL 34652 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	E MARY WHITE			01/21/2020
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PRESIDENT	Title	TREASURER	
Name	KARRAKER, EDITH	Name	MEYERS, JOHN	
Address	QUALIFIED PROPERTY MANAGEMENT 5901 US HWY 19 SUITE 7Q	Address	QUALIFIED PROPERTY MANAGEMENT 5901 US HWY 19 SUITE 7Q	
City-State-Zip:	NEW PORT RICHEY FL 34652	City-State-Zip:	NEW PORT RICHEY FL 34652	2
Title	SECRETARY	Title	DIRECTOR	
Name	PUGH, ROBIN	Name	DAVIS, SHARON	
Address	QUALIFIED PROPERTY MANAGEMENT 5901 US HWY 19 SUITE 7Q	Address	QUALIFIED PROPERTY MANAGEMENT 5901 US HWY 19 SUITE 7Q	
City-State-Zip:	NEW PORT RICHEY FL 34652	City-State-Zip:	NEW PORT RICHEY FL 34652	2
Title	DIRECTOR			
Name	PIZER, SUSAN			
Address	QUALIFIED PROPERTY MANAGEMENT 5901 US HWY 19 SUITE 7Q			
City-State-Zip:	NEW PORT RICHEY FL 34652			

# FILED Jan 21, 2020 Secretary of State 2146871546CC

Certificate of Status Desired: No

Date