

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000000048

**Entity Name:** PARKWOOD SQUARE APARTMENTS ASSOCIATION B, INC.

**Current Principal Place of Business:**

5880 38TH AVE. N. 209  
ST. PETERSBURG, FL 33710

**Current Mailing Address:**

11350 66TH ST. N. 124  
LARGO, FL 33773

**FEI Number:** 59-1808864

**Certificate of Status Desired:** No

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

HOLIDAY ISLES PROPERTY MANAGEMENT, INC.  
11350 66TH ST. N., STE. 124  
LARGO, FL 33773 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           S/T  
Name           HILBURN, WAYNE R  
Address       5880 38TH AVE. N., BLDG. #209  
City-State-Zip: ST. PETERSBURG FL 33710-1965

Title           VP  
Name           LUBISCO, EVA  
Address       5880 38TH AVE. N., BLDG. #204  
City-State-Zip: ST. PETERSBURG FL 33710-1965

Title           P, PRESIDENT  
Name           SEGEHARTH, GEOFFERY  
Address       5880-104 38TH AVE N #311  
City-State-Zip: SAINT PETERSBURG FL 33710

*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:** GEOFFERY SEGEHARTH

**PRESIDENT**

**02/06/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date