

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06151

Entity Name: PARK EAST CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**3800 E. SILVER SPRINGS BLVD.-OFFICE
OCALA, FL 34470**Current Mailing Address:**3800 E. SILVER SPRINGS BLVD.-OFFICE
OCALA, FL 34470 US**FEI Number:** 59-2715555**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARRISON, RACHEL V. TREASURER
3800 E. SILVER SPRINGS BLVD. -#16
OCALA, FL 34470 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:** RACHEL V. HARRISON

02/28/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP
Name	STEPHENSON, BILL	Name	TEVLIN, RAY
Address	2123 S. W. 20 PLACE	Address	3800 E. SILVER SPRINGS BLVD.-#7
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34470
Title	TREASURER	Title	DIRECTOR
Name	HARRISON, RACHEL V.	Name	ELZA, DEBBIE
Address	3800 E. SILVER SPRINGS BLVD.-#16	Address	3800 E. SILVER SPRINGS BLVD.-#4
City-State-Zip:	OCALA FL 34470	City-State-Zip:	OCALA FL 34470
Title	DIRECTOR	Title	SECRETARY
Name	NOWICK, AUDREY	Name	WILLIAMS, VELMA
Address	3800 E. SILVER SPRINGS BLVD.-#3	Address	3800 E. SILVER SPRINGS BLVD.-#15
City-State-Zip:	OCALA FL 34470	City-State-Zip:	OCALA FL 34470

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: RACHEL V. HARRISON

TREASURER

02/28/2017

Electronic Signature of Signing Officer/Director Detail

Date