

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06288

**Entity Name:** PARKVIEW-OF-NAPLES CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 08, 2014**  
**Secretary of State**  
**CC7214255942**

**Current Principal Place of Business:**

1100 3RD STREET SOUTH  
NAPLES, FL 34102

**Current Mailing Address:**

5603 NAPLES BLVD.  
NAPLES, FL 34109

**FEI Number: 59-2765954**

**Certificate of Status Desired: No**

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

MOORE PROPERTY MANAGEMENT INC  
5603 NAPLES BLVD.  
NAPLES, FL 34109 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           DIRECTOR  
Name           SANFORD, EARL  
Address        1100 3RD STREET SOUTH  
City-State-Zip: NAPLES FL 34102

Title           VP  
Name           FARRELL, JOHN  
Address        1100 3RD STREET SOUTH  
City-State-Zip: NAPLES FL 34102

Title           SECRETARY  
Name           FITZMAURICE, BARBARA  
Address        1100 3RD STREET SOUTH  
City-State-Zip: NAPLES FL 34102

Title           PRESIDENT  
Name           JONES, ROBERT  
Address        1100 3RD ST. S.  
City-State-Zip: NAPLES FL 34102

*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: ROBERT JONES**

**PRESIDENT**

**04/08/2014**

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

\_\_\_\_\_  
Date