FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

328592

(1)

PARKWAY MAINTENANCE & MANAGEMENT, CO.

Principal Place	of Business	Mailing Address			
5758 - 54 AVENUE NORTH , ST PETERSBURG FL 33709		5758 - 54 AVENUE NORTH ST PETERSBURG FL 33709		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 04/09/1968	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For	
21		26		59-1211990 Not Applicab	ie
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	
24	25		30	Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registered Agent	
11. Pursuant to office or reagent. I am	State dependence of Sections 607.05 gistered agent, or both, in the State familiar with, and accept the obliging	e of Florida. Such chan ge was a	83 84 City es, the above-named corpora	FL 85 Zip Code poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	d
SIGNATURE S	ignature, typed or printed name of registered ag	jent and title if applicable (NOTE	Registered Agent signature requi	ired when reinstating) DATE	٠
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	Change Addition	'n
NAME	COLEN, SIDNEY A		1 2 NAME		
STREET ADDRESS	5758 54 AVENUE NORTH		1.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		1.4 CiTY - ST - ZiP		
TITLE	<u>D</u>	DELETE	2 1 TITLE	Change Addite	n
NAME (FUNK, R J		2 2 NAME		ĺ
STREET ADDRESS	5217 61ST WAY, NORTH		2.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		2 4 CHTY - ST - ZIP		
TITLE	8	DELETE	3 1 TITLE	Change Addition	ᆏ
NAME	POLLECK, A.		3.2 NAME		
STREET ADDRESS	5891 33RD AVE N		3 3 STREET ADDRESS		

CITY-ST-ZIP 14. I hereby certify that the information supplied with this indicated on this annual report or supplemental appropriate or director of the corporation or the recent Block 12 or Block 13 if changed, or on an appropriate or the recent block 12 or Block 13 if changed. qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and ecurate and that my signature shall have the same legal effect as if made under oath; that I am an fered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY - ST - ZIP

4.1 TITLE

5.1 TITLE

5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

ST PETERSBURG FL

ST PETERSBURG FL

COLEN, KENNETH D

ST PETERSBURG FL

5758 54TH AVE N

5758 54 AVENUE NORTH

COLEN.INA A

1/20/98

813. 544 2502

Change

Change

Change

Addition

Addition

Addition

FILED

Jan 26 1998 8:00am

Secretary of State