(9/01)

CR2E034

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 09, 2002 8:00 am Secretary of State DOCUMENT # 328592 1. Entity Name PARKWAY MAINTENANCE & MANAGEMENT, CO. 04-09-2002 90038 007 \*\*\*150.00 Principal Place of Business Mailing Address 8447 SW 99TH STREET ROAD 8447 SW 99TH STREET ROAD OCALA FL 34481 OCALA FL 34481 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1211990 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COLEN, GERALD R ESQ Street Address (P.O. Box Number is Not Acceptable) **DEVITO & COLEN** 7243 BRYAN DAIRY RD LARGO FL 33777 City Zip Code 8. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME COLEN, SIDNEY A NAME STREET ADDRESS 2291 WORLD PARKWAY BLVD WEST STREET ADDRESS CITY-ST-ZIP **CLEARWATER FL 33763** CITY-ST-ZIP ☐ Delete TITLE DS TITLE Change ☐ Addition NAME COLENJINA A NAME STREET ADDRESS 2291 WORLD PARKWAY BLVD WEST STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33763 CITY-ST-ZIP TITLE DΡ ☐ Delete TITLE ☐ Change ☐ Addition NAME. COLEN, KENNETH D. NAME STREET ADDRESS 8447 SW 99TH STREET ROAD STREET ADDRESS CITY-ST-ZIP OCALA FL 34481 CITY-ST-ZIP TITLE ۷P ☐ Delete TITLE ☐ Change Addition NAME COLEN, LESLEE R NAME STREET ADDRESS |2291 WORLD PARKWAY BLVD WEST STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33763 CITY-ST-ZIP TITLE ☐ Delete TITLE Tì Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change [ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling indicated on this report or supplemental report is the and of the corporation or the receiver or trustee the strength of the corporation and attachment with an addition, with all the strength of the st opes of qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of the same legal effect as if made under oath; that I am an officer or director successful this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/02

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Daytime Phone #