

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 328592

FILED  
Feb 26, 2009  
Secretary of State

Entity Name: PARKWAY MAINTENANCE & MANAGEMENT, CO.

**Current Principal Place of Business:**

8447 SW 99TH STREET ROAD  
OCALA, FL 34481

**New Principal Place of Business:**

**Current Mailing Address:**

8447 SW 99TH STREET ROAD  
OCALA, FL 34481

**New Mailing Address:**

FEI Number: 59-1211990      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

COLEN, GERALD R ESQ  
DEVITO & COLEN  
7243 BRYAN DAIRY RD  
LARGO, FL 33777 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DVP ( ) Delete  
Name: COLEN, SIDNEY  
Address: 2291 WORLD PARKWAY BLVD WEST  
City-St-Zip: CLEARWATER, FL 33763

Title: DS ( ) Delete  
Name: COLEN, INA A  
Address: 2291 WORLD PARKWAY BLVD WEST  
City-St-Zip: CLEARWATER, FL 33763

Title: DP ( ) Delete  
Name: COLEN, KENNETH D  
Address: 8447 SW 99TH STREET ROAD  
City-St-Zip: OCALA, FL 34481

Title: VP ( ) Delete  
Name: COLEN, LESLEE R  
Address: 2291 WORLD PARKWAY BLVD WEST  
City-St-Zip: CLEARWATER, FL 33763

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: FARANDA, PHILIP  
Address: 8447 SW 99TH STREET ROAD  
City-St-Zip: OCALA, FL 34481

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH D. COLEN

Electronic Signature of Signing Officer or Director

PRES

02/26/2009

\_\_\_\_\_ Date