

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003920

FILED
Jan 04, 2010
Secretary of State

Entity Name: PARKING FACILITY SYSTEM, INC.

Current Principal Place of Business:

2401 21ST AVENUE SOUTH
NASHVILLE, TN 37212

New Principal Place of Business:

Current Mailing Address:

2401 21ST AVENUE SOUTH
NASHVILLE, TN 37212

New Mailing Address:

FEI Number: 62-1861888 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CFO
Name: HILL, JOHN
Address: 2401 21ST AVENUE SOUTH
City-St-Zip: NASHVILLE, TN 37212

Title: DIR
Name: WOODWARD, GORDON
Address: 2401 21ST AVENUE SOUTH
City-St-Zip: NASHVILLE, TN 37212

Title: SRVP
Name: BODENHOMER, JR, WILLIAM
Address: 2401 21ST AVENUE SOUTH
City-St-Zip: NASHVILLE, TN 37212

Title: TREA
Name: WOODS, DAWN
Address: 2401 21ST AVENUE SOUTH
City-St-Zip: NASHVILLE, TN 37212

Title: SEC
Name: ABBOTT, HENRY
Address: 2401 21ST AVENUE SOUTH
City-St-Zip: NASHVILLE, TN 37212

Title: CEOD
Name: EADS, EMANUEL
Address: 2401 21ST AVE SOUTH
City-St-Zip: NASHVILLE, TN 37212

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HENRY ABBOTT

SEC

01/04/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date