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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jan 30 1997 8:00am Secretary of State

1997

DOCUMENT # P95000090928 (9)

<b>AMERICAN</b>	PARK	AND	RECREATION	COMPANY
MAICHIONIA	L WIN	שוות	HECHEA HON	COMECHI

Principal Place of Business  107 N 11TH ST SUITE A TAMPA FL 33602 US  American Park And Recreation Compa 107 North 11th Street Suite A Tampa, FL 33602			eation Company	3. Date Incorporated or Qualified 11/28/1995 3a. Date of Last Report 02/27/1996		
2. Principal F	Place of Business	2a. Mailing Address	<b>A</b>	4. FEI Number	Applied For	
21		26	1	59-3352361	Not Applicable	
Suite, Apt	#, etc	Suite, Apt. #, etc.	L.	5. Certificate of Status Desired	\$8.75 Additional	
22		27	N	b. Certificate of Status Desired	Fee Required	
City & Stat	te	City & State	NO.	6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	28	Countri	Trust Fund Contribution	Added to Fees	
<del></del>	Country 25	Zip V	Country 30	8. This corporation has liability for in	ntangible tax under s. 199.032, Yes  No	
24	9. Name and Address of Cu		30	Florida Statutes  10. Name and Address of New Rec		
TAT	E. MARK T		B1 Name	To the state of th	ion or Again	
	E. KENNEDY BLVD.					
	TE 1700		82 Street Addre	ess (P.O. Box Number is Not Acceptable	e)	
	IPA FL 33602		83			
			84 City			
			Gity		FL 85 Zip Code	
office of r agent 1 a SIGNATURE	registered agent, or both, in the sam familiar with, and accept the c	obligations of, Section 607.0505, Flor	ulthorized by the corporation ida Statutes.  Registered Agent signature require	on's board of directors. I hereby accep	the appointment as registered	
12.		S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE	VT	DELETE	1.1 TITLE		Change Addition	
NAME	KORS, TERRY L		1.2 NAME			
STREET ADDRESS	3304 LANTANA DR		1.3 STREET ADDRESS			
CITY - ST - ZIP	TAMPA FL	OF ST	1.4 CITY-ST-ZIP			
TITLE	ERVIN, JOHN L	☐ DELETE	2.1 TITLE		Change Addition	
NAME Page 1 Legger 2	107 N11TH S STE A		2.2 NAME		•	
STREET ADDRESS	TAMAP FL		2.3 STREET ADDRESS		*4 -	
CITY SI-ZIP	PCDS	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition	
NAMÉ	KORS, MARGUERITE		3.2 NAME		La ciango La rounon	
STREET ADDRESS	3304 LANTANIA DR		3.3 STREET ADDRESS			
CITY - ST - ZIP	TAMPA FL		3.4 CITY-ST-ZIP			
TIDLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME		•	
STREET ADDRESS			4.3 STREET ADDRESS	·.		
CITY - S1 - ZIP			44 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME	·		
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5.4 CITY-ST-ZIP			

6.4 CITY - ST- ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on a state of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME STREET ADDRESS

CITY - ST - ZIP

DELETE

Daytime Frione #

Change

\_\_\_ Addition