

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000008803

**FILED**  
**Jan 12, 2015**  
**Secretary of State**  
**CC1784246353**

**Entity Name:** HEAVENLY YOUTH PARKS, INC.

**Current Principal Place of Business:**

5960 WEST JONES AVE.  
ZELLWOOD, FL 32798

**Current Mailing Address:**

1601 LAKE VILLA DRIVE  
TAVARES, FL 32778 US

**FEI Number:** 46-3784087

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
SUITE A  
TAMPA, FL 33612 US

*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

**Officer/Director Detail :**

Title PD  
Name ADKINS, MICHAEL  
Address 1601 LAKE VILLA DRIVE  
City-State-Zip: TAVARES FL 32778

Title TD  
Name ADKINS, CASSANDRA  
Address 1601 LAKE VILLA DRIVE  
City-State-Zip: TAVARES FL 32778

Title SD  
Name HUTTON, JOSH  
Address 549 LAKE DOE BLVD.  
City-State-Zip: APOPKA FL 32703

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

**SIGNATURE:** MICHAEL ADKINS

**PRESIDENT**

**01/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date