

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M49110

**FILED  
Jun 01, 2015  
Secretary of State  
CC7213418384**

**Entity Name:** IDLEWILD PARK CORP.

**Current Principal Place of Business:**

444 BRICKELL AVE., SUITE 811  
811  
MIAMI, FL 33131

**Current Mailing Address:**

444 BRICKELL AVE., SUITE 811  
811  
MIAMI, FL 33131

**FEI Number:** 59-2829176

**Certificate of Status Desired:** No

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

CORRIGAN, JOHN P PRES  
444 BRICKELL AVE,  
811  
MIAMI, FL 33131 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	P-S	Title	M
Name	CORRIGAN, JOHN P	Name	CORRIGAN, JOHN P
Address	444 BRICKELL AVE., STE.811	Address	444 BRICKELL AVE. #811
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

*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:** JOHN P. CORRIGAN

**PRESIDENT**

**06/01/2015**

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

\_\_\_\_\_  
Date