

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000059381

**Entity Name:** PARK POINTE PROPERTIES, INC.

**Current Principal Place of Business:**

4600 WEST KENNEDY BLVD.  
TAMPA, FL 33609

**Current Mailing Address:**

PO BOX 18593  
TAMPA, FL 33679

**FEI Number:** 59-3590987

**Certificate of Status Desired:** No

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

ALBERT SALEM & ASSOCIATES  
4600 WEST KENNEDY BLVD.  
TAMPA, FL 33609 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 DP  
Name SALEM, ALBERT MIII  
Address 4600 WEST KENNEDY BLVD.  
City-State-Zip: TAMPA FL 33609

Title DVST  
Name STEWART, RANALD III  
Address 4600 W. KENNEDY BLVD  
City-State-Zip: TAMPA FL 33609

*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:** ALBERT M SALEM III

**PRESIDENT**

**04/27/2015**

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

\_\_\_\_\_  
Date