

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01533

**Entity Name:** PARK AVENUE DEVELOPMENT CORPORATION**Current Principal Place of Business:**535 PARK AVENUE NORTH  
SUITE 224  
WINTER PARK, FL 32789**Current Mailing Address:**P.O. BOX 1508  
WINTER PARK, FL 32790-1508**FEI Number:** 13-3017252**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, WARREN  
535 PARK AVENUE NORTH  
SUITE 224  
WINTER PARK, FL 32789 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** PRESIDENT-ASST SECRETARY-  
TREASURER**Name** GARBE, UDO**Address** 535 PARK AVENUE NORTH  
SUITE 224**City-State-Zip:** WINTER PARK FL 32789**Title** VP, ASST. SECRETARY, DIRECTOR**Name** GARBE, ANGELIKA**Address** 535 PARK AVENUE NORTH  
SUITE 224**City-State-Zip:** WINTER PARK FL 32789**Title** DIRECTOR**Name** WILLIAMS, WARREN E**Address** 535 PARK AVENUE NORTH  
SUITE 224**City-State-Zip:** WINTER PARK FL 32789**Title** DIRECTOR**Name** GARBE, UDO**Address** P.O. BOX 1508**City-State-Zip:** WINTER PARK FL 32790-1508**Title** VICE PRESIDENT-SECRETARY-ASST  
TREASURER**Name** WILLIAMS, WARREN E**Address** 535 PARK AVENUE NORTH  
SUITE 224**City-State-Zip:** WINTER PARK FL 32789**Title** VP, ASST. SECRETARY, DIRECTOR**Name** GARBE, TANIA**Address** P.O. BOX 1508**City-State-Zip:** WINTER PARK FL 32790-1508

*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:** UDO GARBE**PRESIDENT****01/15/2021**

Electronic Signature of Signing Officer/Director Detail

Date