2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

04-28-2008 90365 031 ****61.25
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FILED
08 MAY 13 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 725954

1. Entity Name
PARK TOWERS, INC.

Principal Place of Business	Mailing Address
208 S LAKESIDE DR LAKE WORTH, FL 33460 US	208 S. LAKESIDE DRIVE LAKE WORTH, FL 33460 US

04092008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1513016 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ALLEN, BO 208 S LAKESIDE DR, # 513 LAKE WORTH, FL 33460	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SLATER, DELLE 208 S. LAKESIDE #302 LAKE WORTH, FL 33460	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S RUKIN, JAMES B 208 ALKESIDE, #403 LAKE WORTH, FL 33460	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P JAMES B. RUKIN 208 S. LAKESIDE DR #403 LAKE WORTH FL 33460 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BENSON, EDMUND P 208 ALKESIDE, #201 LAKE WORTH, FL 33460	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EDMUND P. BENSON 208 LAKESIDE DR. #201. LAKE WORTH FL 33460 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ALLEN, BO 208 S. LAKESIDE #513 LAKE WORTH, FL 33460	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 4/5/13
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	O KHANNA, SAMTA 208 LAKESIDE, #103 LAKE WORTH, FL 33460	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Delle Slater, Treasurer 4-14-08 561-582-1578
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

DELLE SLATER