

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725954

FILED  
Feb 20, 2009  
Secretary of State

Entity Name: PARK TOWERS, INC.

## Current Principal Place of Business:

208 S LAKESIDE DR  
LAKE WORTH, FL 33460 US

## New Principal Place of Business:

## Current Mailing Address:

208 S. LAKESIDE DRIVE  
LAKE WORTH, FL 33460 US

## New Mailing Address:

FEI Number: 59-1513016

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALLEN, BO  
208 S LAKESIDE DR, # 513  
LAKE WORTH, FL 33460 US

## Name and Address of New Registered Agent:

RUKIN, JAMES B  
208 S LAKESIDE DR, # 403  
LAKE WORTH, FL 33460 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: JAMES B. RUKIN

02/20/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: TD ( ) Delete  
Name: SLATER, DELLE  
Address: 208 S. LAKESIDE #302  
City-St-Zip: LAKE WORTH, FL 33460

Title: P ( ) Delete  
Name: RUKIN, JAMES B  
Address: 208 S LAKESIDE DR #403  
City-St-Zip: LAKE WORTH, FL 33460

Title: D ( ) Delete  
Name: BENSON, EDMUND  
Address: 208 LAKESIDE DR #201  
City-St-Zip: LAKE WORTH, FL 33460

Title: D ( ) Delete  
Name: KHANNA, SAMTA  
Address: 208 LAKESIDE DR #103  
City-St-Zip: LAKE WORTH, FL 33460

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: KING, EILEEN  
Address: 208 LAKESIDE DR #102  
City-St-Zip: LAKE WORTH, FL 33460

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JAMES B. RUKIN

PRES

02/20/2009

Electronic Signature of Signing Officer or Director

Date