


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # 738346 1. Entity Name PIONEER PARK FOUNDATION, INC.	
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Principal Place of Business 3637 4TH ST N #410 SAINT PETERSBURG, FL 33704 US	Mailing Address 3637 4TH ST N #410 SAINT PETERSBURG, FL 33704 US
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01032006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1728268	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GREEN, JOHN L
3637 4TH ST NORTH
SUITE 410
SAINT PETERSBURG, FL 33704

**DO NOT WRITE
IN THIS SPACE**

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 fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MILLER, THOMAS 234 ESTADO WAY SAINT PETERSBURG, FL 33704
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MILLS, HELEN D. 1 BCH DR SE ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GREEN, JOHN L. JR. 849 31ST TERR NE ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WELLS, PETER B. 500 94TH AVE. N. ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KNOWLTON, DAVID H. 1140 42ND AVE. N.E. ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O LANG, JAMES T 1 BEACH DR SE #1204 ST. PETERSBURG, FL

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IN THIS SPACE**

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: Thomas S. Miller THOMAS S. MILLER, PRESIDENT, 02-23-06 (727) 823-2344
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dying Phone