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FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **761802** **(8)**

1. Corporation Name
PARK EAST OF PINELLAS PARK, INC.

Principal Place of Business	Mailing Address
5117 70TH PLACE N. PINELLAS PARK FL 34665	5369 PARK BLVD. PINELLAS PARK FL 34665 US

3. Date Incorporated or Qualified: **02/09/1982**
3a. Date of Last Report: **02/10/1995**

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: **59-2445190** ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

AMOROSO, GUIDO
5015 70TH PLACE, NORTH
PINELLAS PARK FL 34665

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12		
TITLE	PD	☒ DELETE	1.1 TITLE	PRESIDENT/DIRECTOR	☐ Change ☐ Addition
NAME	LEA, MILLARD		1.2 NAME		
STREET ADDRESS	5137 70TH PLACE, NORTH		1.3 STREET ADDRESS	5030-70 PLACE NO.	
CITY-ST-ZIP	PINELLAS PARK FL		1.4 CITY-ST-ZIP	PINELLAS PARK, FL. 34665	
TITLE	VPD	☒ DELETE	2.1 TITLE	1ST. VICE PRESIDENT/DIRECTOR	☐ Change ☐ Addition
NAME	DELISLE, DOLORES D.		2.2 NAME	VANDER H. ESPY	
STREET ADDRESS	5032 70TH PLACE, NORTH		2.3 STREET ADDRESS	5115 70TH PL. N.	
CITY-ST-ZIP	PINELLAS PARK FL		2.4 CITY-ST-ZIP	PINELLAS PARK FL. 34665	
TITLE	SD	☐ DELETE	3.1 TITLE	2ND. VICE-PRES/DIRECTOR	☐ Change ☐ Addition
NAME	AMOROSO, GUIDO		3.2 NAME	DOLORES H. DELISLE	
STREET ADDRESS	5015 70TH PLACE, NORTH		3.3 STREET ADDRESS	5032-70 PL. NO.	
CITY-ST-ZIP	PINELLAS PARK FL		3.4 CITY-ST-ZIP	PINELLAS PK, FL 34665	
TITLE		☐ DELETE	4.1 TITLE	TREASURER/DIRECTOR	☐ Change ☐ Addition
NAME			4.2 NAME	C. DON BANKS	
STREET ADDRESS			4.3 STREET ADDRESS	5132 70th PLACE N.	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	PINELLAS PK, FL. 34665	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Guido Amoroso _____ 5/1/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (12/95)