

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # F00000006210 1. Entity Name CENTRAL PARK OF AMERICA, INC.		 FILED 08 AUG -4 AM 8:50 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 5601 ROANKE WAY SUITE 100 GREENSBORO, NC 27409 US		Mailing Address 1515 INTERNATIONAL PKWY., #2013 HEATHROW, FL 32746	
2. Principal Place of Business - No P.O. Box # 5751 UPTOWN RD SUITE 210		3. Mailing Address 5751 UPTOWN RD SUITE 200	
City & State CHATTANOOGA TN		City & State CHATTANOOGA, TN	
Zip 37411		Zip 37411	
Country USA		Country USA	
4. FEI Number 52-2248853		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FARRELL, DANIEL 1515 INTERNATIONAL PKWY., #2013 HEATHROW, FL 32746		7. Name and Address of New Registered Agent Name JAMES W. SPRATT III Street Address (P.O. Box Number is Not Acceptable) 4828 S PENINSULA DRIVE City PONCE DELEON FL Zip Code 32127	
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 of current or former registered agent and FEI of agent		BEFORE Registered Agent Signature required when filing for all JAMES W. SPRATT III 7/29/08 DATE	
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PCD NAME SWARTZ, CHRISTOPHER M STREET ADDRESS 1515 INTERNATIONAL PKWY., #2013 CITY-STATE-ZIP HEATHROW, FL 32746	☒ Delete	TITLE OWNER, D NAME JAMES W. SPRATT III STREET ADDRESS 4828 S PENINSULA DRIVE CITY-STATE-ZIP PONCE DELEON, FL 32127	☒ Change ☐ Addition
TITLE D NAME PATTERSON, DANIEL R STREET ADDRESS 1515 INTERNATIONAL PKWY., #2013 CITY-STATE-ZIP HEATHROW, FL 32746	☒ Delete	TITLE PRESIDENT NAME DANIEL FARRELL STREET ADDRESS 5751 UPTOWN RD, SUITE 210 CITY-STATE-ZIP CHATTANOOGA, TN 37411	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-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 607, 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE: 7/29/08 386-34-1922 DATE (Signature Name)	