2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jul 06, 2004 8:00 am **Secretary of State** DOCUMENT # F01000003920 07-06-2004 90115 038 ***550.00 1. Entity Name PARKING FACILITY SYSTEM, INC. Principal Place of Business Mailing Address 2401 21ST AVENUE SOUTH NASHVILLE TN 37212 2401 21ST AVENUE SÖUTH NASHVILLE TN 37212 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State Applied For 4. FEI Number 62-1861888 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition ABBOTT, HENRY J NAME NAME STREET ADDRESS 2401 21ST AVE S, #200 STREET ADDRESS NASHVILLE TN 37212 City-ST-ZIP CITY-ST-ZIP CD TITLE TITLE ☐ Change Addition A Monroe Carell, Jr. VARESCHI, JR, WILLIAM J NAME NAME 2401 21st Ave South 2401 21ST AVE S, #200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NASHVILLE TN 37212 CITY-ST-ZIP Nashville, TN 37212 TITLE Change □ Detete TITLE ☐ Addition Aresident NAME BODENHÓMER, JR, WILLIAM NAME Will:am STREET ADDRESS 2401 21ST AVE S, #200 STREET ADDRESS 2401 21ST ANE SOUTH CITY-ST-ZIP NASHVILLE TN 37212 CITY-ST-ZIP ashville TN 37212 Delete Addition TITLE TITLE Change reasurer NAME NAME Robert Votteler 2401 AVE COUTH CUITE BOX STREET ADDRESS STREET ADDRESS 2401 21st Ave 5. MACHVILLE TH ST212 CITY-ST-7IP CITY-ST-7/P Nashville, TN 37212 ☐ Defete TITLE Addition TITLE ☐ Change NAME NAME Mark Shapiro STREET ADDRESS STREET ADDRESS me as about CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE · Change ☐ Addition NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 the information stated in Section 119.07(3)(i), 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 the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

Henry J. Alobo

6.23.04 (65)297 -4255

FILED