# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 13, 2005 8:00 am**
**Secretary of State**
05-13-2005 90230 012 ***211.25

DOCUMENT # F03000004523

1. Entity Name
FLORIDA PARKS, INC.

50052589

| Principal Place of Business | Mailing Address |
|---|---|
| 3 HOUSTON STREET<br>COTTONWOOD, AL 36320 | PO BOX 606<br>COTTONWOOD, AL 36320 |

05102005 Chg-P CR2E034 (10/03)

| 2. Principal Place of Business | 3. Mailing Address | 4. FEI Number | |
|---|---|---|---|
| Suite, Apt. #, etc | 3 Houston Street<br>Suite, Apt. #, etc | 63-1264008 | ☐ Applied For<br>☐ Not Applicable |
| City & State | City & State<br>Cottonwood, AL | | |
| Zip / Country | Zip 36320 / Country Houston | 5. Certificate of Status Desired ☐ | $8.75 Additional Fee Required |

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| MONK, DAVID ROBERT<br>115 NORTH FOX AVE.<br>PANAMA CITY, FL 32404 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City FL 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: Dal M 5-7-05
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when changing) DATE

| FILE NOW!!! FEE IS $150.00 Due by September 7, 2005 | 9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
|---|---|---|

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | CPD<br>MONK, DAVID<br>115 NORTH FOX AVE.<br>PANAMA CITY, FL 32404 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VT<br>MONK, SIDNEY<br>1 HOUSTON STREET<br>COTTONWOOD, AL 36320 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>MONK, BOBBY<br>5 HOUSTON STREET<br>COTTONWOOD, AL 36320 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | S<br>MONK, JEFF<br>3 HOUSTON STREET<br>COTTONWOOD, AL 36320 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |

12. I hereby certify that the information supplied with this filing 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 all other like empowered.

SIGNATURE: Dal M 5-7-05 850-527-9475
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #