


**FILED**  
**May 15, 2008 8:00 am**  
**Secretary of State**

05-15-2008 90023 022 \*\*\*150.00

**2008 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

**DOCUMENT # F06000001367**  
 1. Entity Name  
**CENTRAL PARKING SYSTEM-AIRPORT SERVICES, INC.**



Principal Place of Business      Mailing Address  
**2401 21ST AVENUE NORTH, SUITE 200**      **2401 21ST AVENUE NORTH, SUITE 200**  
**NASHVILLE, TN 37212**      **NASHVILLE, TN 37212**

**40102529**



2. Principal Place of Business - No P.O. Box #      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

04212008      Chg-P      CR2E034 (12/06)

4. FEI Number      Applied For  
**62-0844444**      Not Applicable

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

**6. Name and Address of Current Registered Agent**  
**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE, FL 32301-2525**

**7. Name and Address of New Registered Agent**  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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	C CARELL, JR., MONROE 2401 21ST AVENUE NORTH, SUITE 200 NASHVILLE, TN 37212 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP EADS, EMANUAL 2401 21ST AVENUE NORTH, SUITE 200 NASHVILLE, TN 37212 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO EADS, EMANUAL 2401 21ST AVENUE NORTH, SUITE 200 NASHVILLE, TN 37212 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO HEAVIN, JEFF 2401 21ST AVENUE NORTH, SUITE 200 NASHVILLE, TN 37212 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ABBOTT, HENRY J 2401 21ST AVENUE NORTH, SUITE 200 NASHVILLE, TN 37212 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WOODS, DAWN 2401 21ST AVENUE NORTH, SUITE 200 NASHVILLE, TN 37212 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP / CEO Eads, Emanuel 2401 21st Ave S #200 Nashville, TN 37212 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO Hill, John 2401 21st Ave S #200 Nashville, TN 37212 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR Woodward, Gordon 2401 21st Ave S #200 Nashville, TN 37212 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR Hollander, Seth 2401 21st Ave S #200 Nashville, TN 37212 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR Friedler, Samuel 2401 21st Ave S #200 Nashville, TN 37212 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR Halpern, Paul 2401 21st Ave S #200 Nashville, TN 37212 <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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 persons empowered.

**SIGNATURE:** Henry J. Abbott      **4-23-08**      **615-297-4255**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #