

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003817

Entity Name: M.D. PARKS INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

1817 MAPLE LANE
GARRETT, IN 46738

New Principal Place of Business:

3341 CEDAR GLEN WAY
ST. AUGUSTINE, FL 32086

Current Mailing Address:

1817 MAPLE LANE
GARRETT, IN 46738

New Mailing Address:

3341 CEDAR GLEN WAY
ST. AUGUSTINE, FL 32086

FEI Number: 30-0062001

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARKS, MICHAEL
3341 CEDAR GLEN WAY
ST AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPS () Delete
Name: PARKS, MICHAEL
Address: 1817 MAPLE LANE
City-St-Zip: GARRETT, IN 46738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPS (X) Change () Addition
Name: PARKS, MICHAEL
Address: 3341 CEDAR GLEN WAY
City-St-Zip: ST. AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL PARKS

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date