

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 02, 2003 8:00 am**  
**Secretary of State**

04-02-2003 90086 037 \*\*\*150.00

**DOCUMENT # F94000002802**

1. Entity Name  
**PARKWAY COMMUNICATIONS CORP.**



Principal Place of Business  
**5150 N OCEAN DRIVE  
RIVIERA BEACH FL 33419**

Mailing Address  
**BOX 400  
NAPLES FL 34108  
US**



2. Principal Place of Business  
**5150 N. OCEAN DR.**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State  
**RIVIERA BEACH - FL**

City & State

4. FEI Number **52-1228362**

Applied For  
Not Applicable

Zip **33404** Country **Palm Beach**

Zip Country

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

**ORLICH, DANIEL P  
203 CORAL CAY DRIVE  
PALM BEACH GARDENS FL 33418**

Name **P. DANIEL ORLICH**

Street Address (P.O. Box Number is Not Acceptable)

**5150 N OCEAN DRIVE**

City **RIVIERA BEACH** FL Zip Code **33404**

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]*  
Signature, typed or printed name of registered agent and title if applicable.

**P. DANIEL ORLICH**  
(NOTE: Registered Agent signature required when reinstating)

**3/28/2003**  
DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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 **PC** ☐ Delete  
NAME **ORLICH, P D**  
STREET ADDRESS **1221 GULFSHORE BLVD NORTH**  
CITY-ST-ZIP **NAPLES FL 33940**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **SD** ☐ Delete  
NAME **ORLICH, DIANA S**  
STREET ADDRESS **1221 GULFSHORE BLVD NORTH**  
CITY-ST-ZIP **NAPLES FL 33940**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *[Signature]* **P. DANIEL ORLICH** **3/28/2003** **305/978/1900**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

003693629  
AV

CR2E034 (10/02)