

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F99000001407

FILED  
Mar 21, 2003  
Secretary of State

Entity Name: PARK MANAGEMENT GROUP, INC.

## Current Principal Place of Business:

4770 S. ATLANTA RD.  
SMYRNA, GA 30080

## New Principal Place of Business:

## Current Mailing Address:

4770 S. ATLANTA RD.  
SMYRNA, GA 30080

## New Mailing Address:

FEI Number: 58-2106271

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: DP ( ) Delete  
Name: HENRITZE, ROBERT M  
Address: 4770 S. ATLANTA RD.  
City-St-Zip: SMYRNA, GA 30080

Title: DC ( ) Delete  
Name: SHEA, MICHAEL D  
Address: 4770 S. ATLANTA RD.  
City-St-Zip: SMYRNA, GA 30080

Title: DVT ( ) Delete  
Name: CARLEY, C. DAVID  
Address: 4770 S. ATLANTA RD.  
City-St-Zip: SMYRNA, GA 30080

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT M. HENRITZE

DP

03/21/2003

Electronic Signature of Signing Officer or Director

Date