

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 03, 2004 8:00 am
Secretary of State

08-03-2004 90001 016 ***150.00

DOCUMENT # H24727

1. Entity Name
FAMPARK, INC.



Principal Place of Business
**880 37TH STREET GULF
MARATHON, FL 33050**

Mailing Address
**880 37TH STREET GULF
MARATHON, FL 33050**

54066285

2. Principal Place of Business

499 Margate

Suite, Apt. #, etc.

3. Mailing Address

499 Margate

Suite, Apt. #, etc.

City & State

Marathon, FL

City & State

Marathon, FL

Zip
33050

Country
Monroe

Zip
33050

Country

07302004

Chg-P

CR2E034 (10/03)

4. FEI Number

59-2466734

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DEVANE, WILLIAM N JR.
5701 OVERSEAS HIGHWAY
SUITE 12
MARATHON, FL 33050**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MAURO, FRANK ☐ Delete
880 37TH ST. GULF
MARATHON, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MAURO, ROSEANNE ☐ Delete
880 37TH ST. GULF
MARATHON, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
mauro, Frank ☒ Change ☐ Addition
499 Margate
MARATHON, FL 33050

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
mauro, Roseanne ☒ Change ☐ Addition
499 Margate
MARATHON, FL 33050

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

ROSEANNE MAURO

11-30-2004

305-743-

6565

x14