

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 07, 2003 8:00 am
Secretary of State

05-07-2003 90183 016 ***150.00

DOCUMENT # 426329
1. Entity Name PARKVIEW HOLDING CO. INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1709 N. Teakwood Dr. W
Suite, Apt. #, etc.
Plant City, Fl
City & State
Zip 33563 Country Hillsborough

3. Mailing Address
Same
Suite, Apt. #, etc.
City & State
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 2473926
59-2696685

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

7. Name and Address of Current Registered Agent
Name Robert G. Parker
Street Address (P.O. Box Number is Not Acceptable) 1709 N. Teakwood Dr. W
City Plant City, Fl FL Zip Code 33563

**DO NOT WRITE
IN THIS SPACE**

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 Robert G. Parker DATE 4/7/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

January 1st May 1st Fee is \$150.00
After May 1st Fee is \$50.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

8. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President B.M. Smith, Jr. N. Wiggins Rd. Plant City, Fl 33566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. President Peggy S. Cassels P O Box 5779 Salt Springs Fl 32134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. President J. Benton Stewart 1104 Dunbar Ave Tampa, Fl 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec./Tres. Robert G. Parker 1709 N. Teakwood Dr. W. Plant City, Fl 33563
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Robert G. Parker Sec./Tres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(813) 754-5163

4/7/03 Daytime Phone #

CR2E034B (12/02)