2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# H41658

Entity Name: PARKING AREA MAINTENANCE, INC.

Current Principal Place of Business:

6920 ASPHALT AVE
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

PO BOX 24270
TAMPA, FL 33623

New Mailing Address:

FEI Number: 59-2502053 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GILLIGAN, TERRIE L.
6920 ASPHALT AVENUE
TAMPA, FL 33614 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PT ( ) Delete
Name: GILLIGAN, TERRIE L PT
Address: 6920 ASPHALT AVE
City-St-Zip: TAMPA, FL 33614

Title: VP ( ) Delete
Name: GILLIGAN, PATRICK VP
Address: 6920 ASPHALT AVE
City-St-Zip: TAMPA, FL 33614

Title: VP ( ) Delete
Name: STANISLAUS, TODD VP
Address: 6920 ASPHALT AVE
City-St-Zip: TAMPA, FL 33614

Title: S ( ) Delete
Name: STANISLAUS, MARY S
Address: 6920 ASPHALT AVE
City-St-Zip: TAMPA, FL 33614

Title: VP ( ) Delete
Name: LEET, THOMAS R
Address: 6920 ASPHALT AVE
City-St-Zip: OLDSMAR, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GILLIGAN, TERRIE L P
Address: 6920 ASPHALT AVE
City-St-Zip: TAMPA, FL 33614

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

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

Title: ST (X) Change ( ) Addition
Name: STANISLAUS, MARY ST
Address: 6920 ASPHALT AVE
City-St-Zip: TAMPA, FL 33614

Title: VP (X) Change ( ) Addition
Name: LEET, THOMAS R
Address: 6920 ASPHALT AVE
City-St-Zip: TAMPA, FL 33614

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY C STANISLAUS S T 05/01/2006

Electronic Signature of Signing Officer or Director — Date