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FILED
May 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H62818

(0)

1. Corporation Name

PARK FOREST DEVELOPMENT CORP.

Principal Place of Business

P.O. BOX 21238
SARASOTA FL 34276-4238
US

Mailing Address

P.O. BOX 21238
SARASOTA FL 34276-4238
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

06/14/1985

3a. Date of Last Report

05/01/1996

4. FEI Number

58-1645811

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

JOHNSON, MICHAEL
2018 OAK TERRACE
SARASOTA FL 34231

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

Michael Johnson

4/23/97

12. OFFICERS AND DIRECTORS

TITLE VAS ☒ DELETE

NAME WHITEHEAD, VICKI
STREET ADDRESS 2197 CANTON ROAD, SUITE 201
CITY-ST-ZIP MARIETTA GA

TITLE PD ☐ DELETE

NAME TERRY, EDWARD L.
STREET ADDRESS 2401 LAKE PARK DRIVE, SUITE 355
CITY-ST-ZIP MARIETTA GA

TITLE VAS ☐ DELETE

NAME JOHNSON, MICHAEL
STREET ADDRESS 2018 OAK TERRACE
CITY-ST-ZIP SARASOTA FL

TITLE V ☐ DELETE

NAME JOHNSON, MICHAEL
STREET ADDRESS 2018 OAK TERRACE
CITY-ST-ZIP SARASOTA FL

TITLE VST ☒ DELETE

NAME OWINGS, KENT S
STREET ADDRESS 2197 CANTON ROAD, SUITE 201
CITY-ST-ZIP MARIETTA GA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

CR2E034 (9/96)