

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 13, 2008 08:00 AM
Secretary of State

DOCUMENT # H72531

1. Entity Name
PARTYLAND, INC.



Principal Place of Business
6849 ST AUGUSTINE RD
JACKSONVILLE, FL 32217

Mailing Address
6849 ST AUGUSTINE RD
JACKSONVILLE, FL 32217



02042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2572132	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GLOCKER, THEODORE W., JR.
2532 GULF LIFE TOWER
JACKSONVILLE, FL 32207

**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

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
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DARLING, JAMES EDWARD
STREET ADDRESS	8118 SUMMIT RIDGE DR.
CITY- ST- ZIP	JACKSONVILLE, FL

TITLE	S
NAME	DARLING, ANNE HELOW
STREET ADDRESS	8118 SUMMIT RIDGE DR.
CITY- ST- ZIP	JACKSONVILLE, FL

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U00000826575
02/21/08-80056-001 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

James E Darling 2/6/08