2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2009
Secretary of State

DOCUMENT# L02000019747

Entity Name: PARKVIEW CENTER, LLC

Current Principal Place of Business:

33 4TH STREET NORTH
SAINT PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

880 EDEN ISLE BLVD., N.E.
ST. PETERSBURG, FL 33704

New Mailing Address:

FEI Number: 32-0038233 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ULRICH, LISA
880 EDEN ISLE BLVD NE
SAINT PETERSBURG, FL 33704 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BARNETT, JOHN B
Address: 1926 COFFEE POT BLVD.
City-St-Zip: ST. PETERSBURG, FL 33704

Title: MGRM ( ) Delete
Name: ULRICH, LISA
Address: 880 EDEN ISLE BLVD NE
City-St-Zip: SAINT PETERSBURG, FL 33704

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ULRICH, LISA A
Address: 880 EDEN ISLE BLVD. N.E.
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: MGRM (X) Change ( ) Addition
Name: ANDERSON, TERRI
Address: 880 EDEN ISLE BLVD NE
City-St-Zip: SAINT PETERSBURG, FL 33704

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LISA A. ULRICH MGRM 04/10/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date