

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000078010

FILED
Apr 03, 2009
Secretary of State

Entity Name: PARK CENTER, L.L.C.

Current Principal Place of Business:

13966 W HILLSBOR AVE
TAMPA, FL 33635

New Principal Place of Business:

3811 MULLENHURST DR
PALM HARBOR, FL 34685 US

Current Mailing Address:

13966 W HILLSBOR AVE
TAMPA, FL 33635

New Mailing Address:

3811 MULLENHURST DR
PALM HARBOR, FL 34685 US

FEI Number: 16-1734525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CERULLO, SALVATORE
11966 W HILLSBOROUGH AVE
TAMPA, FL 33635 US

Name and Address of New Registered Agent:

CERULLO, SALVATORE
3811 MULLENHURST DR
PALM HARBOR, FL 34685 US

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: _____

04/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FARHADI, MATT M
Address: 13966 W HILLSBOR. AVE
City-St-Zip: TAMPA, FL 33635 US

Title: MGR () Delete
Name: CERULLO, SALVATORE
Address: 13966 W HILLSBOR. AVE
City-St-Zip: TAMPA, FL 33635

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CERULLO, SALVATORE
Address: 3811 MULLENHURST DR.
City-St-Zip: PALM HARBOR, FL 34685 US

Title: MGR (X) Change () Addition
Name: FARHADI, ADELINA
Address: 3811 MULLENHURST DR.
City-St-Zip: PALM HARBOR, FL 34685 US

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: SLAVATORE CERULLO

MGR

04/03/2009

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