

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L89432

Entity Name: UNION PARK SERVICE, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

604 SHADOW GLENN PL
WINTER SPRINGS, FL 32708

New Principal Place of Business:

1145 ARBOR GLEN CIRCLE
WINTER SPRINGS, FL 32708

Current Mailing Address:

1117 ARBOR GLEN CIR
WINTER SPRINGS, FL 32708

New Mailing Address:

1145 ARBOR GLEN CIRCLE
WINTER SPRINGS, FL 32708

FEI Number: 59-3026210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WISEMAN, DONALD A.
604 SHADOW GLENN PL
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

WISEMAN, DONALD A.
1145 ARBOR GLEN CIRCLE
WINTER SPRINGS, FL 32708 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:

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WISEMAN, DONALD A.,
Address: 604 SHADOW GLENN PL
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WISEMAN, DONALD A.,
Address: 1145 ARBOR GLEN CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

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 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: DONALD A. WISEMAN

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date