FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M95235

(1)

Mailing Address

PARK AVENUE PROPERTIES, INC.

FILED
May 06 1998 8:00am
Secretary of State

| 1 9 19 UPA 1819 | C FORWAY BURN BURN | |
|---------------------------|--------------------|--|

| 1202 E PARK AVENUE SUITE B Tallahassee FL 32301 | | 1202 E PARK AVENUE S TALLAHASSEE FL 32301 | 1202 E PARK AVENUE SUITE B TALLAHASSEE FL 32301 | | | | |
|--|--|--|--|---------------------------------------|--|-------------------------|-------------|
| | | | | | DO NOT WRITE IN THIS 3. Date incorporated or Qualified | SPACE | |
| | | | | | 08/22/1988 | | |
| 2. Principal Place of Business | | 2a. Mailing Address | | | 4. FEI Number | Applied F | For |
| 21 | | 26 | F " | | 59-2906694 | Not Applic | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | - | | | \$8.75 Addition | |
| 22 | | 27 | | | 5. Certificate of Status Desired | Fee Required | |
| City & State | | City & State | | · · · · · · · · · · · · · · · · · · · | 6. Election Campaign Financing | \$5.00 May Be | 3e |
| 23 | | 28 | | · | Trust Fund Contribution | Added to Fees | |
| Zip | Country | Zip | Count | ry | 8. This corporation owes or has paid the cu | | е |
| 24 | 9, Name and Address of Cu | | 30 | | Personal Property Tax due June 30. | Yes L No | |
| CAL | | rrent negistered Agent | | 1 Name | 10. Name and Address of New Registered | Agent | |
| | CH, ELAINE B. | | Ľ | IVallie | | | |
| | E PARK AVENUE #B | | 82 Street Ad | | dress (P.O. Box Number is Not Acceptable) | | |
| IALL | AHASSEE FL 32301 | | 8: | 3 | | | |
| | | |] | 1 | | | |
| | | | 8 | 4 City | Fi | 85 Zip Code | |
| 11. Pursuant to | the provisions of Sections 607 | 0502 and 607 1508. Florida Statuto | es the abo | ve-named co | propration submits this statement for the purpose | | torod |
| office or reg | i ste red agent, or both, in the S | tate of Florida. Such change was a bligations of, Section 607.0505, Flo | uthorized b | by the corpor | ration's board of directors. I hereby accept the ap | pointment as register | red |
| SIGNATURE SIGNATURE | nature typod of printed name of registered | d agent and title if applicable (NO1) | Registered A | gent signature reg | u-red when reinstating) DATE | | |
| 12. | OFFICERS | AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS AN | ID DIRECTORS IN 12 | 2 |
| TITLE | DP . | DELETE | 1.1 TITLE | T | | Change Ad | ddition |
| NAME | S ALCH, ELAINE BYRUM | | 1.2 NAME | | | | |
| STREET ADDRESS | 32 Walker RD. | | 1.3 STRE | et address | | | |
| CITY-ST-ZIP | PANACEA FL 32346 | | 1.4 CITY- | ST-ZIP | | | |
| TITLE | | DELET E | 2.1 THILE | | | Change Ad | ddition |
| NAME | | | 2.2 NAME | . | | | |
| STREET ADDRESS | | | 2.3 STREE | T ADDRESS | | | |
| CITY-ST-ZIP | | | 2. 4 CITY | - S1 - ZIP | | | |
| TITLE | | DECETE | 3.1 TATLE | | | ☐ Change ☐ Ad | ddition |
| NAME | | | 3.2 NAME | • | | | |
| STREET ADDRESS | | | 3.3 STREE | T ADDRESS | | | |
| CITY-ST-ZIP | | - Jersei | 3.4. CITY | | | | |
| TITLE | | [_] DELETE | 4.1 TITLE | | | ☐ Change ☐ Ad | ddition |
| NAME | | | 4. 2 NAM | | | | |
| STREET ADDRESS | | | 4.3 STREE | T ADDRESS | | | |
| CITY-ST-ZIP | <u></u> | Toriere | 4.4 CHY- | ST-ZIP | | | |
| TITLE | | ☐ DELETE | 51 THLE | | | ☐ Change ☐ Add | Jdition |
| NAME | | | 5.2 NAME | | | | |
| STREET ADDRESS | | | | T ADDRESS | | | |
| CITY-SY-ZIP | | DELETE | 5.4 CITY- | ST - 7IP | | Change City | d aliaba — |
| TITLE | | ☐ Nerest | 6.1 TITLE | | | Change Add | MODIUM |
| NAME EXPECT APPRICE | | | 6.2 NAME | - 1 | | 255\\J | |
| STREET ADDRESS | | | | T ADDRESS | 50000251796 -05/11/9801013-0 ***150.00 | 8 -1- | |
| 14. I hereby cert | ifv that the information supplier | d with this filing does not qualify for | 6.4 CITY - | | 東京第15日。月日 n Section 119.07(3)(i), Florida Statutes. I further c | artify that the informs | alion |
| Indicated on | this annual report or suppleme | ental annual report is true and accu | irate and th | nat my signat | ture shall have the same legal effect as if made up | nder oath; that I am a | an I |
| Block 12 or l | Bl oc k 13 if changed, or_ori an a | attachnient with an addysss. | xecute this | report as rec | quired by Chapter 607, Florida Statutes; and that | my name appears in | ١ |
| | .DI | - A 1100 | | | 11/20/00. | | 1 |