2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N00000000230 1. Entity Name ABILITIES AT PARKLANE, INC.



Feb 05, 2007 8:00 am Secretary of State 02-05-2007 90118 030 ****61.25

FILED

Principal Place of Business 2735 WHITNEY RD. CLEARWATER, FL 33760		Mailing Address 2735 WHITNEY RD. CLEARWATER, FL 33760		6001		88// 88// 88/8 / 1888 // 1888 // 1888 // 1888 // 1888 // 1888 // 1888 // 1888 // 1888 // 1888 // 1888 // 1888 /	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01122007 CH	ng-NP	CR2E037 (12/06)
City & State		City & State		4. FEI Number 59-361797	8	 +-	Applied For Not Applicable
Žip	Country	Zıp	Country	5. Certificate of St.	atus Desired	\$8.75 A	dditional
	6. Name and Address of Current	Registered Agent		7. Name and Add	ress of New Re	gistered Agent	
			Name				
GENE THOMAS 2735 WHITNEY ROAD CLEARWATER, FL 33760			Street Address		Not Acceptable)		
			City	·· <u>-</u>	· —	FL Zip Co	odę
	e named entity submits this statement for tions of registered agent.	or the purpose of changing its	registered office or re	egistered agent, or both, in	the State of Flori		h, and accept
SIGNATURE							
	Signature, typed or printed name of registered agent	and title it applicable. (NOTE:	: Registered Agent signature i	required when reinstating)		DATE	
Filing Fee is \$61.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make check payable to Florida Department of State		
	•		` ` `				
10.	•	Trust Fund Co	` ` `		Florid	la Department of	State
TITLE NAME STREET ADDRESS	OFFICERS AND DIE VD KREISLE, LORI 5300 10TH AVE N	Trust Fund Co	ontribution.	Added to Fees	Florid	la Department of	State IN 10
TITLE	OFFICERS AND DIE VD KREISLE, LORI	Trust Fund Co	Ontribution. 11. TITLE NAME STREET ADDRESS	Added to Fees	Florid	S AND DIRECTORS	State IN 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIE VD KREISLE, LORI 5300 10TH AVE N SAINT PETERSBURG, FL 3371 PD SANDONATO, WILLIAM JR. 2735 WHITNEY ROAD	Trust Fund Co	Ontribution.	Added to Fees	Florid	la Department of S AND DIRECTORS I	State IN 10 Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIE VD KREISLE, LORI 5300 10TH AVE N SAINT PETERSBURG, FL 3371 PD SANDONATO, WILLIAM JR. 2735 WHITNEY ROAD CLEARWATER, FL 33760 SYT DRISCOLL, PAT 2735 WHITNEY RD	Trust Fund Co	Ontribution.	Added to Fees	Florid	la Department of S AND DIRECTORS Change	State IN 10 Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIE VD KREISLE, LORI 5300 10TH AVE N SAINT PETERSBURG, FL 3371 PD SANDONATO, WILLIAM JR. 2735 WHITNEY ROAD CLEARWATER, FL 33760 SYT DRISCOLL, PAT 2735 WHITNEY RD CLEARWATER, FL 33780 D KLEAKE, GUY 2735 WHITNEY ROAD	Trust Fund Co	Ontribution.	Added to Fees ADDITIONS/CHANGE	Florid	S AND DIRECTORS I Change Change Change	State IN 10 Addition Addition

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 617, 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: SIMPSON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

727-538-7370

Daytime Phone #