

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 25, 2005 8:00 am**  
**Secretary of State**

01-25-2005 90031 041 \*\*\*\*61.25

**DOCUMENT # N01171**

1. Entity Name  
CITY PARK PLACE, INC.



Principal Place of Business  
1330 S.E. 4TH AVENUE  
FORT LAUDERDALE, FL 33316 US

Mailing Address  
P.O. BOX 030399  
FT. LAUDERDALE, FL 33303 US

**40005528**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01132005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number  
59-2368068

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STOCKTON, RANDALL K DR  
1330 SE 4TH AVE., SUITE L  
FT. LAUDERDALE, FL 33316

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

**Make check payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete  
NAME STOCKTON, DR. RANDALL  
STREET ADDRESS 1330 SE 4TH AVENUE, SUITE L  
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE PD ☒ Change ☐ Addition  
NAME William Bodenhamer  
STREET ADDRESS 1330 SE 4th Avenue, Suite D  
CITY-ST-ZIP Fort Lauderdale, Florida 33316

TITLE VD ☐ Delete  
NAME DOVE, DR. DENNIS  
STREET ADDRESS 1330 SE 4TH AVENUE, SUITE H  
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE STD ☒ Delete  
NAME BODENHAMER, WILLIAM  
STREET ADDRESS 1330 SE 4TH AVENUE, SUITE D  
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE STD ☒ Change ☐ Addition  
NAME Dr. Randall Stockton  
STREET ADDRESS 1330 SE 4th Avenue, Suite L  
CITY-ST-ZIP Fort Lauderdale, Florida 33316

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*William Bodenhamer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William Bodenhamer, President

1-11-05 954-524-6500

Date

Daytime Phone #