2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001435

FILED Sep 02, 2009 Secretary of State

Entity Name: PARKWAY CARIBBEAN SPORTS AND SOCIAL CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 5410 SW 129TH AVENUE MIRAMAR, FL 33027 US **Current Mailing Address: New Mailing Address:** 5410 SW 129TH AVENUE MIRAMAR, FL 33027 FEI Number: 56-2502860 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOWATT, PAUL 14520 SW 21ST STREET DAVIE, FL 33325 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete MAITLAND, DAVID BAILEY, PATRICK Name: Name: 5410 SW 129 AVE Address: 2916 RIVER RUNN CIRCLE WEST Address: City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: MIRAMAR, FL 33025 Title: Title: (X) Change () Addition () Delete Name: GRANT, GARY Name: WARBURTON, CHRIS Address: 17543 SW 140 CT. Address: 5410 SW 129 AVE City-St-Zip: MIAMI, FL 33177 City-St-Zip: MIRAMAR, FL 33027 Title: () Delete Title: (X) Change () Addition MCLEAN, CUTIE BAILEY, GRACE Name: Name: 14700 NW 3RD AVE 2916 RIVER RUNN CIRCLE WEST Address: Address: City-St-Zip: MIAMI, FL 33168 City-St-Zip: MIRAMAR, FL 33025 Title: () Delete Title: () Change () Addition MOWATT, PAUL Name: Name: 14520 SW 21ST STREET Address: Address: City-St-Zip: **DAVIE, FL 33325** City-St-Zip: Title: () Delete Title: AST (X) Change () Addition BAILEY, PATRICK MCLEAN, CUTIE Name: Name: 2916 RIVER RUNN CIRCLE WEST 14700 NW 3RD AVE Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: MIAMI, FL 33168

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID MAITLAND MEMB 09/02/2009