

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010216

FILED
Jun 25, 2008
Secretary of State

Entity Name: AUSTIN PARK CORPORATION

Current Principal Place of Business:

401 GREENBRIAR ROAD
ST JOHNS, FL 32259

New Principal Place of Business:

Current Mailing Address:

401 GREENBRIAR ROAD
ST JOHNS, FL 32259

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)
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:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FOWLER, FRANKIE
Address: 8512 SHANE COURT
City-St-Zip: ST AUGUSTINE, FL 32092

Title: S () Delete
Name: POLK, JIM
Address: 244 IVY LAKES DRIVE
City-St-Zip: ST JOHNS, FL 32259

Title: T () Delete
Name: CLARK, JIM
Address: 1008 WEST DORCHESTER DR
City-St-Zip: ST JOHNS, FL 32259

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: CASTILLO, FRANCISCO
Address: 613 SPARROW BRANCH CIRCLE
City-St-Zip: ST JOHNS, FL 32259

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: FRANCISCO CASTILLO

D

06/25/2008

Electronic Signature of Signing Officer or Director

Date