2007 NOT-FOR-PROFIT CORPORATION

Apr 26, 2007 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # N15769** 04-26-2007 90238 038 ****70.00 PARK WEST CORPORATION dana. Principal Place of Business Mailing Address 1021 N NEW YORK AVE P.O. BOX 470 WINTER PARK, FL 32789 US WINTER PARK, FL 32790 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04172007 Cha-NP CR2E037 (12/06) 4. FEI Number 59-2795623 City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COWART, JR F O Street Address (P.O. Box Number is Not Acceptable) 420 CORNWALL RD WINTER PARK, FL 32792 City 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 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Delete TITLE RICKY AKIN 1537 HUTTERS MILL PLACE WALDHEIM, EDDIE NAME 750 \$ LAKE SYBELIA DR STREET ADDRESS STREET ADDRESS MAITLAND, FL 32751 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change **X** Addition BARBARA STAFFORD 1044 CRYSTAL BOWL CIRCLE CASSELBERRY, FL 32707 YOUNG, ROBERT L NAME 2907 UPPER PARK BLVD STREET ADDRESS STREET ADDRESS ORLANDO, FL 328146101 CITY-ST-ZIP CITY-ST-ZIP BILL RUSH 1916 BELFORD CT. 💢 Delete ☐ Change X Addition TITLE REED, ELLA NAME 4658 HALL RD STREET ADDRESS STREET ADDRESS MAITLAND, FL 3275 CITY-ST-ZIP ORLANDO, FL 328171202 CITY-ST-ZIP ☐ Change Addition . X Delete

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 antachment with an address, with all other like empowered.

NAME

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-ZIP

SIGNATURE:

10.

TITLE

TITLE

NAME

TITLE

NAME

NAME

NAME

NAME

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-71F

CITY-ST-7IP

CITY-ST-ZIP

HUNTER, DON MR

707 THUNDER TR

MAITLAND, FL 32751

COLLEY, CARLTON E

2923 SUMMERFIELD RD

WINTER PARK, FL 32792

CARLOSO E SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Delete

JOAN FOLCY 823 LEOPARD TRAIL

☐ Change

☐ Addition

☐ Addition

FILED