FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra R. Mortham

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N16703

(3)

PARKWAY CENTER MERCHANTS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

FILED

May 09 1997 8:00am

Secretary of State

C/O HOWARD DALE/ DALE & BALD 200 W FORSYTH ST #1100 JACKSORVILLE FL 32202 US			C/O HOWARD DALE/ DALE & BALD 200 W FORSYTH STREET #1100 JACKSONVILLE FL 32202-4308 US					-	3. Date Incorporated or 09/09/1986	Qualified	3a. Dale	e of Last R /14/1996	eporl 3	
2. Principal Place of Business				2a. Mailing Address					4. FEI Number		•	Ap	plied For	
21 1777 NE EXPRESSIVALY			26 1777 NE EXPROSSWAY					<u>'</u>	36-3394112	 		No	t Applicable	
Suite, Apt. #, etc. 22 Suite 145			Suite, Apl. #, etc. 27 Swt 145						5. Certificate of Status E	Desired		\$8.75 / Fee Re		
	lanta 6A			City & State 28 Attanta UA					Election Campaign Fi Trust Fund Contribution	•	\$5.00 May Be Added to Fees			
Zip 24 30 3	25 1	ASK	29	Zip 30529	30	Oountr U	SA		8. This corporation has Florida Statutes	liability for in	ntangible ta	ax under s No	199.032,	
9. Name and Address of Current Registered Agent								1	10. Name and Address	of New Reg	Istered A	gent		
1		Name												
DALE, HOWARD 200 W FORSYTH STREET							82 Street Address (P.O. Box Number is Not Acceptable)							
							Shoot Modition (1.0), Dox realither is not Acceptable)							
SUITE 1100														
JACKSON	WILLE FL 32202			84	City					12-11				
							,				FL	85 Zip (
11. Pursuant office or ragent. I a	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.													
SIGNATURE		name of registered agent							her reinstating)		DATE			
12.		OFFICERS AND			I	13.	og one	equilibra ii	ADDITIONS/CHANGES	S TO DEELC		DIBECTOR	S IN 12	
TITLE	SD			DELETE	1	11 TITLE				7,0 0.110		Change	Addition	
NÀME	ROLLING, SHAV	VN			ı	1.2 NAME					_			
STREET ADDRESS	1233 APALACHI					T ADDRESS								
CITY-ST-ZIP	TALLAHASSEE					1.4 CITY								
TITLE	TD			DELETE		2.1 TITLE	31-211					Change	Addition	
NAME	GOUDREAU, PR	RISCHLIA		22 N							_	onlingo	1.3 / 1.00/110/11	
STREET ADDRESS	8130 BAYMEAD				2.3 STREET ADDRESS									
CITY-ST-ZIP	JACKSONVILLE				2. # CITY-ST-ZIP									
TITLE	D	· · · · · · · · · · · · · · · · · · ·		DELETE	_	3.1 TITLE	31-211			·		Change	Addition	
NAME	MICK, JUDY					3.2 NAME					_	- Aviantiko	ELL AUGUST	
STREET ADDRESS	1135 APALACHI	FF PKWY					T ADDRESS							
CITY-ST-ZIP	TALLAHASSEE		The state of the s											
TITLE	D			DELETE		3.4. CITY- 4.1 TITLE	31-41				Г	Change	Addition	
NAME	SULZBACHER, 1	MILIAM M				4. 2 NAME						∪ range	LT Vacinati	
STREET ADDRESS	8130 BAYMEAD													
CITY-ST-ZIP	JACKSONVILLE						I ADDRESS							
TITLE	VAVIOUNTILLE	1 h		DELETE		4.4 CHY-: 5.1 TITLE	51 - 214			-	г	Change	[Addition	
NAME				in occur							L	_i Auguñs	FT WOURDII	
STREET ADDRESS						5.2 NAME	LABOREO							
							ADDRESS							
CITY-ST-ZIP TITLE				☐ DELETE		5.4 CITY-!	si-ZIP				- г	Channe	A diables	
						6.1 TITLE					L	_] Change	L_ Addition	
NAME 3	.3					6.2 NAME								
STREET ADDRESS							FADORESS							
CITY-ST-ZIP	by cartify that the let	icematica pumplind	uiths the	in filing dags not avail		6.4 CITY- :			0					

I do hereby certify that the Information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated on this annual report or supplemental annual 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 be execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an efficience.