

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000589

FILED  
Jan 17, 2012  
Secretary of State

Entity Name: PARC SUPPORT SERVICES, INC.

## Current Principal Place of Business:

3190 TYRONE BLVD. NORTH  
ST PETERSBURG, FL 33710

## New Principal Place of Business:

3190 TYRONE BLVD. NORTH  
ST PETERSBURG, FL 33710 US

## Current Mailing Address:

3190 TYRONE BLVD. NORTH  
ST PETERSBURG, FL 33710

## New Mailing Address:

3190 TYRONE BLVD. NORTH  
ST PETERSBURG, FL 33710 US

FEI Number: 59-3438574

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUCHHOLTZ, SUSAN M  
3190 TYRONE BLVD. NORTH  
ST PETERSBURG, FL 33710 US

## Name and Address of New Registered Agent:

HIGGINS, KAREN  
3190 TYRONE BLVD. NORTH  
ST PETERSBURG, FL 33710 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: KAREN HIGGINS

01/17/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D  
Name: FARKAS, FRANK DC  
Address: 3200 4TH STREET NORTH  
City-St-Zip: ST PETERSBURG, FL 33704 US

Title: D  
Name: GUEST, JOHNNIE  
Address: 17960 GULF BLVD #208  
City-St-Zip: REDINGTON SHORES, FL 33708 US

Title: D  
Name: MANFREY, PAUL A  
Address: 3190 TYRONE BLVD NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33710 US

Title: D  
Name: AYOUB, LENA M ESQ  
Address: 3190 TYRONE BLVE NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33710 US

Title: D  
Name: MARCOS, HASBUN ESQ  
Address: 101 E KENNEDY BLVD STE 1200  
City-St-Zip: TAMPA, FL 33602 US

Title: P  
Name: HIGGINS, KAREN  
Address: 3190 TYRONE BLVD. NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33710 US

I hereby 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 all other like empowered.

SIGNATURE: KAREN HIGGINS

PRES

01/17/2012

Electronic Signature of Signing Officer or Director

Date