

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000003736

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: PARKS FOR PEOPLE, INC.

Current Principal Place of Business:

9200 BONITA BEACH ROAD, SUITE 204
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

9200 BONITA BEACH ROAD, SUITE 204
BONITA SPRINGS, FL 34135

New Mailing Address:

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

Name and Address of Current Registered Agent:

SPEAR, JOHN D
9200 BONITA BEACH ROAD, SUITE 204
BONITA SPRINGS, FL 34135

Name and Address of New Registered Agent:

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: D () Delete
Name: SHOEMAKER, VERONICA SAPP
Address: 3054 MANGO STREET
City-St-Zip: FT. MYERS, FL 33916

Title: S () Delete
Name: TRUSSELL PYLE, HOMER
Address: 846 XAVIER AVENUE N.
City-St-Zip: FT. MYERS, FL 33919

Title: PD () Delete
Name: LUCKEY, R. FLOYD JR
Address: 5164 BONITA BEACH RD.
City-St-Zip: BONITA BEACH, FL 34134

Title: T () Delete
Name: SPEAR, JOHN D
Address: 9200 BONITA BEACH RD., STE. 204
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: DESALVO, ANDREW P
Address: 1425 REYNARD DRIVE
City-St-Zip: FT. MYERS, FL 33919

Title: VP () Delete
Name: WEAVER, RONALD
Address: 1500 PALM SQUARE BLVD., #105
City-St-Zip: FT. MYERS, FL 33919

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:

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Address:
City-St-Zip:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: R. FLOYD LUCKEY

PD

04/30/2002

Electronic Signature of Signing Officer or Director

Date