2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000018063

Title:

Name:

Address:

City-St-Zip:

FILED Jan 09, 2004 Secretary of State

Entity Name: PARKSIDE CENTER FOOTACTION, INC.					
Current Principal Place of Business:			New Principal Place of Business:		
7200 US H\ SPACE 150 PINELLAS I		31			
Current Mailing Address:			New Mailing Address:		
PO BOX 141269 IRVING, TX 750141269					
FEI Number:	58-2523511	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Sta	atus Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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.					
SIGNATUR		0: 1 10 :1			
Election Cam		Signature of Registered Agent Frust Fund Contribution ().		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () C NEVILLE, R. SHA 24 B OLD FARM DARIEN, CT 068	RD.	Title: Name: Address: City-St-Zip:	()Change ()Additio	on
Title: Name: Address: City-St-Zip:	SVP () D APPLEBAUM, LE 279 SPRING VAL PARK RIDGE, FL	LEY RD.	Title: Name: Address: City-St-Zip:	()Change ()Additio	on
Title: Name: Address: City-St-Zip:	VPS () C WINTON, NANCY 7880 BENT BRAN IRVING, TX 7506	NCH DR #100	Title: Name: Address: City-St-Zip:	VP (X) Change () Additional WILSON, MARY BETH 3201 W. ROYAL LANE IRVING, TX 75063	on
Title: Name: Address: City-St-Zip:	VP () C COLTER, WARRI 7880 BENT BRAN IRVING, TX 7506	ICH DR #100	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition COLTER, WARREN Z 90 MCKEE MAHWAH, NJ 07340	on

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MARY BETH WILSON VP 01/09/2004

() Delete

() Change (X) Addition

GALANTE, ANDREA

3201 W. ROYAL LANE IRVING, TX 75063