


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2007 8:00 am
Secretary of State

02-07-2007 90046 035 *1,150.00

DOCUMENT # P00000074913	
1. Entity Name PRESTON PARK CORPORATION	

Principal Place of Business 6001 MONTROSE ROAD #606 ROCKVILLE, MD 20852	Mailing Address 6001 MONTROSE RD #606 ROCKVILLE, MD 20852
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DO NOT WRITE IN THIS SPACE



01122007 No Chg-P CR2E034 (11/05)

4. FEI Number 58-2562150	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MANN & WOLF, PA, ANDREW MANN 4300 N UNIVERSITY DR, STE C-203 SUNRISE, FL 33351
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WAGNER, PETER K 5025 COLLINS AVE #1709 MIAMI, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WAGNER, YVONNE R 5025 COLLINS AVE #1709 MIAMI, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WAGNER, ELIZABETH 6001 MONTROSE RD #606 ROCKVILLE, MD 20852
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  1/12/07 301 770 7744
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Elizabeth Wagner