

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010852

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: FOREST PARK PROPERTIES, INC.

**Current Principal Place of Business:**

1902 W. MAIN ST.  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 24162  
TAMPA, FL 33623

**New Mailing Address:**

FEI Number: 59-3719006

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SNOW, NATASHA  
1902 W. MAIN ST.  
TAMPA, FL 33607 US

**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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FABIAN, SABRINA  
Address: 1902 W. MAIN ST.  
City-St-Zip: TAMPA, FL 33607

Title: V ( ) Delete  
Name: FABIAN, DAVID  
Address: 1902 W. MAIN ST.  
City-St-Zip: TAMPA, FL 33607

Title: S ( ) Delete  
Name: FABIAN, DAVID  
Address: 1902 W. MAIN ST.  
City-St-Zip: TAMPA, FL 33607

**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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: DAVID FABIAN

V

04/23/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date