

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 07, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P01000035806**

1. Entity Name  
**STRONG PARK, INC.**



Principal Place of Business  
**1201 SOUTH ORLANDO AVENUE  
SUITE 360  
WINTER PARK, FL 32789**

Mailing Address  
**1201 SOUTH ORLANDO AVENUE  
SUITE 360  
WINTER PARK, FL 32789**



06302004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3713462**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**STRONG, DAVID C  
1201 SOUTH ORLANDO AVENUE  
SUITE 360  
WINTER PARK, FL 32789**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be  
Added to Fees**

**000000163551  
07/07/04-80005-021 550.00**

**10. OFFICERS AND DIRECTORS**

TITLE **D**  
NAME **STRONG, DAVID C**  
STREET ADDRESS **1201 SOUTH ORLANDO AVENUE, SUITE 360**  
CITY-ST-ZIP **WINTER PARK, FL 32789**

TITLE  
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 the empowered.

**SIGNATURE:** David C Strong, President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/04 407 629-1800  
Date Daytime Phone #