


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 10, 2005 08:00 AM
Secretary of State**

DOCUMENT # P03000100302 1. Entity Name PARKWAY RECRUITING, INC.	
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Principal Place of Business 3275 S. JOHN YOUNG PARKWAY SUITE 222 KISSIMMEE, FL 34746	Mailing Address 3275 S. JOHN YOUNG PARKWAY SUITE 222 KISSIMMEE, FL 34746
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01142005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 80-0075921	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent YOUNG, JOHN D 2904 SQUIRE OAK CT SAINT CLOUD, FL 34769
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**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 _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) **DATE** _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

1000000258832
03/10/05-80058-025 158.75

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T YOUNG, SAVANNAH M 2904 SQUIRE OAK CT SAINT CLOUD, FL 34769
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOUNG, JOHN D 2904 SQUIRE OAK CT SAINT CLOUD, FL 34769
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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 like empowered.

SIGNATURE: John D. Young Savannah M. Young 3-8-2005 407-823-6429
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #