

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90077 030 ***150.00

DOCUMENT # P05000144890

1. Entity Name
PARKWAY PLAZA INC,



Principal Place of Business
**2573 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308**

Mailing Address
**2573 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308**

40075595



04122007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3693062

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**RUSSELL, DIXIE
2573 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308**

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P/D
NAME	RUSSELL, DIXIE
STREET ADDRESS	2573 BARRINGTON CIRCLE
CITY-ST-ZIP	TALLAHASSEE, FL 32308

TITLE	VP,S
NAME	JARRETT, JAMES
STREET ADDRESS	3025 NATHAN LANE
CITY-ST-ZIP	TALLAHASSEE, FL 32308

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *Dixie Russell* **Dixie Russell** **4-13-07** **850 385-4646**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #