

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 09, 2007 8:00 am**  
**Secretary of State**

04-09-2007 90088 011 \*\*\*150.00

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03262007 Chg-P CR2E034 (12/06)

<b>DOCUMENT # P05000146275</b> 1. Entity Name <b>PARKS INVESTMENT &amp; MANAGEMENT, INC.</b>			
Principal Place of Business <b>203 N. INDUSTRIAL AVENUE SUITE 3 ORANGE CITY, FL 32763 US</b>		Mailing Address <b>203 N. INDUSTRIAL AVENUE SUITE 3 ORANGE CITY, FL 32763 US</b>	
2. Principal Place of Business - No P.O. Box # <b>135 E Minnesota Ave</b> Suite, Apt. #, etc.		3. Mailing Address <b>135 E Minnesota Ave</b> Suite, Apt. #, etc.	
City & State <b>Orange City, FL</b> Zip <b>32763</b> Country		City & State <b>Orange City, FL</b> Zip <b>32763</b> Country	
4. FEI Number <b>20-3714246</b>		<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>PARKS, YOLANDA 203 N. INDUSTRIAL AVENUE SUITE 3 ORANGE CITY, FL 32763</b>		7. Name and Address of New Registered Agent Name <b>Yolanda Parks</b> Street Address (P.O. Box Number is Not Acceptable) <b>135 E Minnesota Ave</b> City <b>Orange City</b> State <b>FL</b> Zip Code <b>32763</b>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>PARKS, YOLANDA</b> <b>135 W HOLLY DRIVE</b> <b>ORANGE CITY, FL 32763</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>PARKS, MICHEAL</b> <b>135 W. HOLLY DRIVE</b> <b>ORANGE CITY, FL 32763</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PARKS, MICHAEL W</b> <b>955 KICKLIGHTER RD</b> <b>LAKE HELEN, FL 32744</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PARKS, ALICIA</b> <b>135 W HOLLY DR</b> <b>ORANGE CITY, FL 32763</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.			
<b>SIGNATURE:</b> <i>Yolanda Parks</i> / <b>Yolanda Parks</b>		Date <b>4-6-07</b> Daytime Phone # <b>386-775-7099</b>	