2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P05000147523

1. Entity Name

RESEARCH PARKWAY ASSOCIATES, INC.



Principal Place of Business

7680 UNIVERSAL BLVD.

STE 380

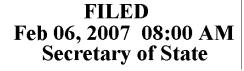
ORLANDO, FL 32819

Mailing Address

7680 UNIVERSAL BLVD.

STE 380

ORLANDO, FL 32819





01032007

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-3726922

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BATES, DAVID 7680 UNIVERSAL BLVD SUITE 380 ORLANDO, FL 32819

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the obliga	tions of registered agent.	ourpose of changing its r	egistered of	fice or r	egistered agent, or bol	h, in the State of Florida. I am familiar with, and a	ccept
	Signature, typed or printed name of registered agent and little	fapplicable (NOTE:	Registered Ager	nt 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	U00000624573 02/14/07-80041-003 150.	0 0
10. OFFICERS AND DIRECTORS			}	_			
TITLE	D						
NAME	HUBBARD, JOHN E JR.		ľ				
STREET ADDRESS	7680 UNIVERSAL BLVD., STE. 380						
CITY-ST-ZIP	ORLANDO, FL 32819						
TITLE	D						

BATES, DAVID 7680 UNIVERSAL BLVD., STE. 380 STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32819 TITLE BROCK, JEFFREY NAME STREET ADDRESS 7680 UNIVERSAL BLVD., STE. 380 CITY-ST-ZIP ORLANDO, FL 32819 TITLE NAME CAMPESE, JEFFREY STREET ADDRESS 7680 UNIVERSAL BLVD., STE. 380 CITY-ST-ZIP ORLANDO, FL 32819 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 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 pacaddress, with all other like empowered.

SIGNATURE

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-6-67

40-25-1220

Daytime