

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000147523

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** RESEARCH PARKWAY ASSOCIATES, INC.

**Current Principal Place of Business:**

7232 SAND LAKE RD, STE 300  
ORLANDO, FL 32819

**New Principal Place of Business:**

7232 SAND LAKE RD  
SUITE 300  
ORLANDO, FL 32819

**Current Mailing Address:**

7232 SAND LAKE RD, STE 300  
ORLANDO, FL 32819

**New Mailing Address:**

7232 SAND LAKE RD  
SUITE 300  
ORLANDO, FL 32819

FEI Number: 20-3726922

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BATES, DAVID  
7232 SAND LAKE ROAD  
SUITE 300  
ORLANDO, FL 32819 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: HUBBARD, JOHN E JR.  
Address: 4700 L.B. MCLEOD ROAD, SUITE B2  
City-St-Zip: ORLANDO, FL 32811

Title: D  
Name: BATES, DAVID  
Address: 7232 SAND LAKE ROAD - SUITE 300  
City-St-Zip: ORLANDO, FL 32819

Title: D  
Name: BROCK, JEFFREY  
Address: 7232 SAND LAKE ROAD - SUITE 300  
City-St-Zip: ORLANDO, FL 32819

Title: D  
Name: CAMPESE, JEFFREY  
Address: 4700 L.B. MCLEOD ROAD SUITE B2  
City-St-Zip: ORLANDO, FL 32811

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: A. DAVID BATES

D

02/17/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date