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FILED  
Jan 27 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000011268 (8)

1. Corporation Name

PIN-PARK INVESTORS, INC.



Principal Place of Business

28059 U.S. 19 NORTH  
SUITE 100  
CLEARWATER FL 34621  
US

Mailing Address

28059 U.S. 19 NORTH  
SUITE 100  
CLEARWATER FL 34621  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/15/1993

4. FEI Number

59-3249960

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip 33761

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 33761

Country

9. Name and Address of Current Registered Agent

KIMPTON, WILLIAM J.  
28059 US HIGHWAY 19 NORTH  
SUITE 100  
CLEARWATER FL 34621

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code 33761

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME KIMPTON, WILLIAM J  
STREET ADDRESS 28059 US 19 N SUITE 100  
CITY-ST-ZIP CLEARWATER FL

TITLE VD  
NAME FRANK, JOHN  
STREET ADDRESS 10010 US HWY. 19 NORTH  
CITY-ST-ZIP PORT RICHEY FL

TITLE STD  
NAME CARLESIMO, UNORIO  
STREET ADDRESS P.O. BOX 838 NA  
CITY-ST-ZIP OZONA FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP 33761

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP 34668

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP 34660

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE WILLIAM J. KIMPTON

JAN 5, 1998

CR2E034 (10/97)