FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300063380 (8)

PARK LOT, INC.

Principal Prace of Business
1310 REDWOOD AVE.

Mailing Address

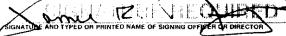
FILED Feb 07 1997 8:00am Secretary of State



1310 REDWOOD AVE. PANAMA CITY FL 32401		P.O. BOX 35374 PANAMA CITY FL 32412-5374					
					3. Date Incorporated or Qualified 09/13/1993	3a. Date of Las 01/26/199	
·,	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21	,	26			59-3211390		Not Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State 23		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
7 p 24	Country Zip Country 25 29 30				This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Reg	istered Agent	
	'ANT, ROWLETT W			1 Name			
833 HARRISON AVE. PANAMA CITY FL 32401				82 Street Address (P.O. Box Number is Not Acceptable)			
			[8	3			
			8	4 City		FL 85 Z	ip Code
office or re agent I ar SIGNATURE	to the provisions of Sections out, or egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature, band or printed name of registrics as	e of Horida. Such change was gations of, Section 607,0505, Fl	authorized orida Statul	by the corpo es.	corporation submits this statement for the proporation's board of directors. I hereby acceptions when reinstating)	the appointment	as registered
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		TORS IN 12
TITLE	PD	☐ DELETÉ	1.1 TITL	E T		Chang	ge Addition
NAME	MOODY III, JAMES R		1.2 NAM	E			
STREET ADDRESS	P.O. BOX 35374 N/A		1.3 STAI	ET ADDRESS			
DITY-ST ZIP	PANAMA CITY FL		1.4 CITY	-ST-ZIP			
THTLE		☐ DELETE	2.1 TITL	:		L.J. Chang	ge L. Addition
NAM:			2.2 NAM	E			
STREET ADDRESS			2.3 STR	ET ADORESS			
C(TY - S1 - Z(P		DELETE		r-ST-ZIP		Chang	ge Addition
TITLE		☐ OELEIE	3 1 TITL 3.2 NAM			Chang	ge L Adumium
NAME STREET ADDRESS				ET ADORESS			
CITY - ST - ZIP				(-ST-ZIP			
TITLE		DELETE	4.1 TITL			Chang	ge Addition
NAME			4 2 NA				
STREET ADDRESS			43 STRI	ET ADDRESS			
CITY-ST-ZIP			4.4 City	-ST-ZIP			
THLE		☐ DELETE	5.1 TiTL	E		Chang	ge Addition
NAME			5.2 N AN	IE }	•		
STREET ADDRESS			5.3 STR	et address			
CHTY - ST - ZiP				-ST-ZIP			
TITLE		☐ DELETE	6.1 TITL			Chang	ge L. Addition
NAME			6.2 NAM				
STREET ADDRESS			6.3 STRI	ET ADDRESS			
CITY-SI-ZIP	and the state of t	and the state of the or state of the control of		-ST-ZIP	sted in Section 119 07/3Vi). Elorida Statutes	l further partifics	hat the

If do 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 on an attachment with an address.

SIGNATURE:



2-3-97

904-782-6139