

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000006347

Entity Name: PARK VIEW INNS, INC.

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

1409 KINGSLEY AVE
BLDG 2
ORANGE PARK, FL 32073 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2426
ORANGE PARK, FL 32067 US

New Mailing Address:

FEI Number: 59-3353905 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUYRES, DAVID J
2412 STOCKTON DRIVE
GREEN COVE SPRINGS, FL 32043 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: DST () Delete
Name: GAUDRY, CHARLES L JR.
Address: 4419 HARBOUR ISLAND DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: DV () Delete
Name: VANWINKEL, ROBERT
Address: 13074 AUTUMN RIVER ROAD
City-St-Zip: JACKSONVILLE, FL 32224

Title: P () Delete
Name: MUYRES, DAVID J
Address: 2412 STOCKTON DR.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: GAUDRY, CHARLES L JR.
Address: 1886 SEMINOLE RD
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAVID MUYRES

P

04/17/2009

Electronic Signature of Signing Officer or Director

_____ Date