


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90159 003 ***150.00

DOCUMENT # P96000061617

1. Entity Name
PARKWAY INVESTMENT PROPERTIES, INC.



Principal Place of Business Mailing Address
1112 E. DANEGAN AVE **1112 E. DANEGAN AVE**
KISSIMMEE, FL 34744 US **KISSIMMEE, FL 34744 US**

40094371



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

04302008 Chg-P CR2E034 (12/06)

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For
59-3394447 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

COMPTON, BARRY
1130 E DONEGAN AVENUE STE 4
KISSIMMEE, FL 34744

7. Name and Address of New Registered Agent

Name: **Barry Compton**
 Street Address (P.O. Box Number is Not Acceptable): **1112 E Donegan Ave**
 City: **Kissimmee** FL Zip Code: **34744**

B. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: **April 30, 08**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	COMPTON, BARRY	
STREET ADDRESS	1112 E. DONEGAN AVE	
CITY-ST-ZIP	KISSIMMEE, FL 34744	
TITLE	V	<input type="checkbox"/> Delete
NAME	COMPTON, PENNY	
STREET ADDRESS	1112 E. DONEGAN AVE	
CITY-ST-ZIP	KISSIMMEE, FL 34744	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Pres & Dir.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Barry Compton	
STREET ADDRESS	1112 E. Donegan Ave	
CITY-ST-ZIP	Kissimmee, FL 34744	
TITLE	V-Pres, & Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Penny Compton	
STREET ADDRESS	1112 E. Donegan Ave	
CITY-ST-ZIP	Kissimmee, FL 34744	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

SIGNATURE:  DATE: **April 30, 08** DAYTIME PHONE #: **321-624-786**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #