

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2003 8:00 am
Secretary of State

02-26-2003 90121 049 ***150.00

DOCUMENT # P97000019663



1. Entity Name
PARK PLACE OF GAINESVILLE, INC.

Principal Place of Business
13777 BELCHER RD
LARGO FL 33771

Mailing Address
13777 BELCHER RD
LARGO FL 33771
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3431985**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PIAZZA, STEVEN A
13777 BELCHER RD
LARGO FL 33771

Name
SOCKOL, DAVID J. Esq.
Street Address (P.O. Box Number is Not Acceptable)
111 SECOND AVENUE N.E.
PLAZA TOWER, SUITE 1401
City
ST. PETERSBURG **FL** **Zip Code**
33701

8. 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

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, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ **Delete**
NAME **PIAZZA, STEVEN A**
STREET ADDRESS **13777 BELCHER RD**
CITY-ST-ZIP **LARGO FL 33771**

TITLE **DPST** ☐ **Change** ☒ **Addition**
NAME **YOUNG, JOHN T.**
STREET ADDRESS **13777 BELCHER ROAD S.**
CITY-ST-ZIP **LARGO, FL. 33771**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
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CITY-ST-ZIP

TITLE ☐ **Delete**
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12. 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 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:

SIGNATURE REQUIRED

John T. Yang

010902

727-726-3310

Date

Daytime Phone #

CR2E034 (10/02)