

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000103556

FILED
Apr 24, 2006
Secretary of State

Entity Name: PARKDALE MANAGEMENT, INC.

Current Principal Place of Business:

190 BALSAM DR.
OLDSMAR, FL 34677 US

New Principal Place of Business:

Current Mailing Address:

OLDSMAR POST OFFICE
P.O. BOX 0724
OLDSMAR, FL 34677 US

New Mailing Address:

190 BALSAM DRIVE
OLDSMAR, FL 34677 US

FEI Number: 59-3481667

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOVELACE, WILLIAM K
2310 WEST BAY DRIVE
LARGO, FL 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: P () Delete
Name: NASER, MOHAMMED Y
Address: 190 BALSAM DR.
City-St-Zip: OLDSMAR, FL 34677 US

Title: VPM () Delete
Name: NASER, RENATE K
Address: 190 BALSAM DRIVE
City-St-Zip: OLDSMAR, FL 34677 US

Title: D () Delete
Name: NASER, NADIM M
Address: 190 BALSAM DR.
City-St-Zip: OLDSMAR, FL 34677

Title: D (X) Delete
Name: NASER, ADEL N
Address: 190 BALSAM DR.
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NASER, RENATE K
Address: 190 BALSAM DR.
City-St-Zip: OLDSMAR, FL 34677 US

Title: VPM (X) Change () Addition
Name: NASER, NADIM M
Address: 190 BALSAM DRIVE
City-St-Zip: OLDSMAR, FL 34677 US

Title: D (X) Change () Addition
Name: NASER, ADEL N
Address: 190 BALSAM DR.
City-St-Zip: OLDSMAR, FL 34677

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RENATE NASER

P

04/24/2006

Electronic Signature of Signing Officer or Director

_____ Date