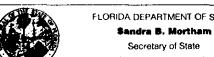
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT #
1. Corporation Name
PARK PROMENADE,



DIVISION OF CORPORATIONS

## DOCUMENT # P97000105115 (4)

## FILED May 13 1998 8:00am Secretary of State

PARK I	PROMEN	ADE, INC.		•	•			E SONICOL HIT TOUR LOTH DOWN SOUN ABIN HOW	DOIDI OILEI ILAKI I	4 <b>88</b> : 8111 1681
Principal Place	o of Rusines			Mailing Address						
Principal Place of Business Mailing Address  921 GEORGIA AVENUE 921 GEORGIA AVENUE										
WINTER PARK FL 32789 WINTER PARK FL 32789								DO NOT WRITE IN TH	IO ODACE	
								3. Date Incorporated or Qualified	IS SPACE	
								12/15/1997		
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For		
21			26	26				59-3493273 Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired	•	Additional lequired
City & State				City & State				# Floation Compaign Figureins		
23				28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip		Country		<b>Z</b> ip	Co	untry	<i>y</i>	8. This corporation owes or has paid the		
24		25	29		30			Personal Property Tax due June 30.		No.
		and Address of	Current Reg	istered Agent			T .:	10. Name and Address of New Register	ed Agent	******
		CAROLINE M				61	Name			
921 GEORGIA AVENUE WINTER PARK FL 32789						82	Street Addr	iss (P.O. Box Number is Not Acceptable)		
						83				
	^					84	City	F	<b>85</b> Zip	Code
11, Pursuant t	to the provis	ions of Mctions (	07.0502 and	607,1503, Florida S	tatutes, the a	boy	e-named corp	poration submits this statement for the purpose	of changing	its registered
office or re	egysterod ag m tantiliar w	gent, or both, in the	State of Flo	orida Such change v	vas authorize	d be	y the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the	appointment as	s registered
SIGNATURE	(11	11/1/11/11	T. Mil	1 Km	3, 1 lonioù 510		0.			
SIGNATURE	Shower types	or purply number of regi			(NOTE Registere	ed Age	ent signature requir	ired when reinstating) DATI		
12.		OFFICE	RS AND DIR		13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D D	*********	N IAIT 44	☐ DELETE	<b>I</b>		- 1		Change	Addition
NAME		EN BERG, CARO ORGIA AVENUI				IAME				
STREET ADDRESS		R PARK FL 327					ADDRESS			
CITY-ST-ZIP TITLE	TYPAIL	THINTE		DELETE			ST-ZIP		Change	Addition
NAME				Dietere	221				onange	L Radiilon
STREET ADDRESS					•		T ADDRESS			
CITY-ST-ZIP							ST-ZIP			
TITLE				DELETE					Change	Addition
NAME					3.2 N	NAME				
STREET ADDRESS					3.3 9	STREET	T ADDRESS			
CITY-ST-ZIP						CITY-	ST-ZIP			
TITLE				DELETE	4.1 T	TTLE		<del></del>	Change	☐ Addition
NAME						NAME				
STREET ADDRESS							ADDRESS			
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TITLE				L DELETE					Change	L Addition
NAME STREET ADDRESS					5.2 N		T ADDRESS			
CITY-ST-ZIP					J		T ADDRESS ST-ZIP			ı
TITLE				DELETE			DI-ZIF		Change	Addition
NAME					6.2 N					
STREET ADDRESS							T ADDRESS			
CITY-ST-ZIP					6.4 9	XTY-S	ST-ZIP			
14. I hereby o	ertify that th	e information sup	plied with this	s filing does not qual	lify for the ex	emp	otion stated in	Section 119.07(3)(i), Florida Statutes. I further ure shall have the same legal effect as if made juired by Chapter 607, Florida Statutes; and th	certify that the	a information
officer or	director of the	ne comoration or	the repulser of	or truling empowered	to execute	this	report as requ	juired by Chapter 607, Florida Statutes; and th	at my name ap	opears in