

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000061806

Entity Name: PARK AVENUE T.L.C., INC.

FILED
Apr 23, 2008
Secretary of State

Current Principal Place of Business:

200 VILLAGE GREEN CIRCLE EAST
SUITE K204
PALM SPRINGS, FL 33461

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 20981
WEST PALM BEACH, FL 334160981

New Mailing Address:

FEI Number: 65-0851466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET
4TH FLOOR
MIAMI, FL 33145 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: PD () Delete
Name: PETERS, THOMAS G
Address: P.O. BOX 20981
City-St-Zip: WEST PALM BEACH, FL 33416

Title: STD () Delete
Name: JOPEK-PETERS, JOYCE RN
Address: P.O. BOX 20981
City-St-Zip: WEST PALM BEACH, FL 33416

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: THOMAS G. PETERS

PD

04/23/2008

Electronic Signature of Signing Officer or Director

Date