2002 UNIFORM BUSINESS REPORT (UBR)

Apr 18, 2002 8:00 am Secretary of State **DOCUMENT #** S48217 1. Entity Name PARC REALTY, INC. Principal Place of Business Mailing Address 4314 PABLO OAKS COURT 4314 PABLO OAKS COURT JACKSONVILLE FL 32224 JACKSONVILLE FL 32224 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3063759 Not Applicable Zip Country Zip Country **\$8.75** Additional .5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name EDWARDS, TANYA P Street Address (P.O. Box Number is Not Acceptable) 4314 PABLO OAKS COURT JACKSONVILLE FL 32224 City Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE ☐ Change ■ Addition BARBOUR, GREGORY L. NAME NAME 4314 PABLO OAKS COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME O'STEEN ROGER M. NAME STREET ADDRESS 4314 PABLO OAKS COURT STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL _ -CITY-ST-ZIP TITLE ☐ Delete П Спапое ☐ Addition TITLE NAME NAME OWENS, LAUREN L. STREET ADDRESS STREET ADDRESS 4314 PABLO OAKS COURT CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL ☐ Change ☐ Addition Delete TITLE TITLE EDWARDS, TANYA P NAME NAME STREET ADDRESS 4314 PABLO OAKS COURT STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32224 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition RANDALL, JULIE NAME NAME STREET ADDRESS 88 MARSHSIDE DR STREET ADDRESS CITY-ST-ZIP ST AUGUSTINE FL CITY-ST-ZIP ☐ Change ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if

SIGNATURE: 4

Daytime Phone