Applied For

Not Applicable

## 2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 315321** PARROTT INC Principal Place of Business Mailing Address P O BOX 848 P O BOX 848 315 S. PARROTT AVENUE 315 S. PARROTT AVENUE OKEECHOBEE FL 34973 OKEECHOBEE FLA 34973-0848 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number 59-1171493

## FILED Apr 03, 2000 8:00 am Secretary of State

04-03-2000 90182 029 \*\*\*158.75



DO NOT WRITE IN THIS SPACE

Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Addition Fee Required	nal	
	6. Name and Address of Current	Registered Agent	<u> </u>	7. Name and Address of New Registered Agent		
			Name			
CULBRETH, H. G. JR.				Street Address (P.O. Box Number is Not Acceptable)		
1209-SW*15TH ST. OKEECHOBEE FL 34972				1700 ZW 10 th - Street		
UNE	EUNUDEE FL 348/2					
		· · · · · · · · · · · · · · · · · · ·	City	Keechobic FL Zip Code 34974	<i></i>	
3. The above	named entity submits this statement f	or the purpose of changing i	ts registered office or re	egistered agent, or both, in the State of Florida.	1	
SIGNATURE .				required when reinstating) DATE	<u></u>	
	Signature, typed or printed name of registered agen	t and title if applicable. (NC	OTE: Registered Agent signature	required when reinstating)		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!! FEE After MAY 1, 2000 Fee Make Check Payable to D			·	0.00 Trust Fund Contribution.	•	
l1.	OFFICERS AND	DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	11	
TITLE	PD	☐ Delete	TITLE		Addition	
NAME	CULBRETH JR,H G		NAME	rand!		
STREET ADDRESS	1209 S.W. 15TH STREET		STREET ADDRESS	1700 IW 16th Street		
CITY-ST-ZIP	OKEECHOBEE FL		CITY-ST-ZIP			
TITLE	VD VP	□ Delete	TITLE	Nice President 12 Change	Addition	
NAME	CULBRETH,L J	r Delete	NAME	A I Ch I Let 1 Gard		
STREET ADDRESS	300 S.E. 4TH STREET		STREET ADDRESS			
CITY-ST-ZIP	OKEECHOBEE FL		CITY-ST-ZIP			
TITLE	SST	Delete	TITLE	Addres	Addition	
NAME	CULBRETH, MARIE A.	. Delete	NAME	having ~ -	•	
TREET ADDRESS	1209 SW 15TH ST.		STREET ADDRESS	1700 5 W 16 th Street		
CITY-ST-ZIP	OKEECHOBEE FL		CITY-ST-ZIP	OKeech abor FT. 24974		
TITLE			TITLE	Change	Addition	
IAME		L D0000	NAME		•	
TREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
			TITLE	☐ Change	Addition	
IAME		□ Delete	NAME			
STREET ADDRESS			STREET ADDRESS			
DITY-ST-ZIP			CITY-ST-ZIP			
TITLE		Delete	TITLE	☐ Change ☐	Addition	
NAME		Detets	NAME	Jilange		
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
	l			d in Section 119.07(3)(i), Florida Statutes. I further certify that the inform		

of the corporation or the receiver or trustee empowered to execute this report changed, or on an attachment with an address, with all other like empowered.

