



2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2004 08:00 AM
Secretary of State

DOCUMENT # 736167 1. Entity Name PARC HOUSING, INC.	
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Principal Place of Business 3190 75TH STREET NORTH ST. PETERSBURG, FL 33710	Mailing Address 3190 TYRONE BLVD NORTH ST. PETERSBURG, FL 33710 US
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DO NOT WRITE IN THIS SPACE

	
03032004 No Chg-NP	CR2E037 (10/03)
4. FEI Number 59-1700361	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THOMAS, CURTIS D
 3190 TYRONE BLVD NORTH
 ST. PETERSBURG, FL 33710

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25
Due by May 1, 2004

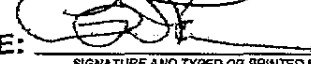
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000089949
 03/16/04-80010-009 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THOMAS, CURTIS D 3190 TYRONE BLVD NORTH ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRAWFORD, BRUCE 7425 WATERSILK DR. PINELLAS PARK, FL 34666
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PILKINGTON, DAVID 11701 BELCHER RD. STE 104 LARGO, FL 33643
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEDLEY, MARTY 4300 45 STREET S SAINT PETERSBURG, FL 33711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAPRADE, MARK 11 PARADISE LANE TREASURE ISLAND, FL 33706
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARR, SKIP 1006 41ST AVE. N. SAINT PETERSBURG, FL 33703

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 189.07(3)(f), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Curtis Thomas - President** 3/4/04 727-345-9111
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #