## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Mar 02, 2005 08:00 AM **Secretary of State DOCUMENT # P93000083355** 1. Entity Name PARKER & SON REFRIGERATION, INC. Principal Place of Business Mailing Address 5543 PEACH AVE. 5543 PEACH AVE. SEFFNER, FL 33584 SEFFNER, FL 33584 02282005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3216847 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PARKER, DONALD DO NOT WRITE 5543 PEACH AVE. SEFFNER, FL 33584\_\_ 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when rolnstating) U00000248772 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 03/02/05-80040-018 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PARKER, DONALD NAME STREET ADDRESS 5543 PEACH AVE. CITY-ST-ZIP SEFFNER FL 33584 TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**FILED** 

ARKER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: