2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006270

Entity Name: THE PARRISH FOUNDATION, INC.

Current Principal Place of Business:

2012 ISLAND ESTATE DRIVE PARRISH, FL 34219

Current Mailing Address:

POST OFFICE BOX 794 PARRISH, FL 34219

FEI Number: 32-0254616 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCGUIRE, HUGH E JR. 417 - 12TH ST. W. SUITE 203 BRADENTON, FL 34205 US

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

FILED Mar 07, 2019

Secretary of State

4157068126CC

Officer/Director Detail:

Title DIRECTOR Title DVP

Name DOWLING, RAE Name JORDAN, BEN

Address 1177 NORTH LIME AVENUE Address 2012 ISLAND ESTATE DRIVE

City-State-Zip: PARRISH FL 34219 City-State-Zip: SARASOTA FL 34237

Title **PRESIDENT** Title

PRESHA. MICKEY Name Name WILLIAMS, BRITT

Address 12271 US HIGHWAY 301 NORTH Address 607 7TH STREET E

PARRISH FL 34219 City-State-Zip: **BRADENTON FL 34208** City-State-Zip:

Title **TREASURER** Title **DIRECTOR**

ANDERSON, ALAN V Name Name MCGUIRE, HUGH E JR. 13615 22ND CT. E Address Address 11690 ERIE ROAD City-State-Zip: PARRISH FL 34219 City-State-Zip: PARRISH FL 34219

Title DIRECTOR Title **SECRETARY**

Name JORDAN, REBECCA Name MCGUIRE, CAROL

Address 2012 ISLAND ESTATE DRIVE Address 11690 ERIE ROAD

PARRISH FL 34219 City-State-Zip: City-State-Zip: PARRISH FL 34219

I hereby 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 617, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.

03/07/2019 SIGNATURE: ALAN ANDERSON **TREASURER**

Electronic Signature of Signing Officer/Director Detail

Date