

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 315321

**Entity Name:** PARROTT, INC.

**Current Principal Place of Business:**

315 SOUTH PARROTT AVENUE  
OKEECHOBEE, FL 34974

**Current Mailing Address:**

P O BOX 848  
OKEECHOBEE, FL 34973 US

**FEI Number:** 59-1171493

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CULBRETH, HUGH GJR.  
1700 SW 16TH STREET  
OKEECHOBEE, FL 34974 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

**Officer/Director Detail :**

Title DP  
Name CULBRETH, HUGH GJR.  
Address 1700 SW 16TH STREET  
City-State-Zip: OKEECHOBEE FL 34974

Title DVP  
Name LUNA, CHRISTA C  
Address 1788 SW 7TH AVE  
City-State-Zip: OKEECHOBEE FL 34974

Title DST  
Name CULBRETH, MARIE A  
Address 1700 SW 16TH STREET  
City-State-Zip: OKEECHOBEE FL 34974

Title D  
Name CULBRETH, JEREMIAH G  
Address 1872 SW 7TH AVE  
City-State-Zip: OKEECHOBEE FL 34974

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** HUGH G CULBRETH,JR.

**AGENT**

**01/25/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date