

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000025766

**FILED**  
**Jan 07, 2015**  
**Secretary of State**  
**CC5264051155**

**Entity Name:** PARKER ENTERPRISES ATHENS 2 LLC

**Current Principal Place of Business:**

1793 SUPREME CT  
NAPLES, FL 34110

**Current Mailing Address:**

1793 SUPREME CT.  
NAPLES, FL 34110 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PARKER, ROBERT  
1793 SUPREME CT..  
NAPLES, FL 34110 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

**Authorized Person(s) Detail :**

Title	MGR	Title	MANAGER
Name	PARKER, ROBERT	Name	KARANTONIS, TAMARA
Address	1793 SUPREME CT.	Address	1012 JONES RD.
City-State-Zip:	NAPLES FL 34110	City-State-Zip:	ROSWELL GA 30075

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ROBERT PARKER**

**MANAGER**

**01/07/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date