2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 151787

Entity Name: PAR INC

Address:

City-St-Zip:

723 HAVILAND DR.

MALVERN, PA 19010

FILED Feb 19, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
	MAIN STREE A BEACH, FL				
Current Mailing Address:			New Mailing Address:		
	ROKEE ROAD BEACH, FL 3	2174			
FEI Number	: 59-1114823	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
179 CHEF	OUGH, EUGEI ROKEE RD BEACH, FL 3				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	UNATIN, NELS	ΓΙC AVE STE 1202	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (ZANDI, AVA N 50 LAUREL CII MALVERN, PA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	ST (BLICKMAN, LII) Delete NDA	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: EUGENE H MCCULLOUGH RA 02/19/2009