2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## **DOCUMENT # 186775**

1. Entity Name

## PARSON ENTERPRISES INC

**FILED** 

Mar 28, 2006 8:00 am Secretary of State

03-28-2006 90136 002 \*\*\*150.00

A CREAR CLEAN LANCE AND CARREST AND A CONTRACT AND A CONTRACT AND CONT

March 20,2006 (561)-833-6845

PARSON ENTERPRISE INC
1347 N MAGNOLIA DR
WEST PALM BEACH FL 33401

Principal Place of Business

**SIGNATURE:** 

Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PARSON ENTERPRISES INC 1347 N MAGNOLIA DR WEST PALM BEACH FL 3340

WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401									
2. Principal P	Place of Business	3. Mailing Address			1100		AIDII AIDII EISII OISII	TIEN BIRKER	11 II 1881
•	n Enterprise, Inc.	•	roris	se. Inc.					
Suite. Apt. #, etc. 1347 N. Mangonia Drive		Suite, Apt. #, etc. 1347 N. Mangonia Drive			1st MOORE CR2E034 (10/05)				
City & State West Palm Beach, FL		West Palm Beach, FL			4. FEI Numb	59-0945213			ied For Applicable
Zip 33401		Country Zip Cou			5. Certificate of Status Desired				
	6. Name and Address of Current R	Registered Agent	i Agent		7. Name and Address of New Registered Agent				
PARSON, RUBY 1347# N. MANGONIA DR.				Name Street Address (P.O. Box Number is Not Acceptable)					
W.P	P. BCH FL 33401								
			City			···	FL Zi	ip Code	
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 renstating) DATE									
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$559.00						9. Election Campaign		•	May Be
	k Payable to Florida Department of	State -				Trust Fund Contrib	oution.	Addea	to Fees
10.	OFFICERS AND D	DIRECTORS	11.		ADDITIONS	/CHANGES TO OFFICE	ERS AND DIRE	CTORS I	N 11
TITLE	P	☐ Delete	TITLE				C	hange	Addition
NAME	PARSON, RUBY		NAME						
STREET ADDRESS CITY-ST-ZIP	1347 N.MANGONIA DR. WEST PALM BEACH FL 33401		STREET A	ADDRESS - 7/P					
FIFLE	S	Delete	TITLE	- 20				hange	Addition
NAME	PARSON, JAKE A	□ Descue	NAME				<u>.</u> ب	Hangs	Addings,
STREET ADDRESS	1347 N. MANGONIA DR.			ADDRESS					
CITY-ST-ZIP	W.P. BCH FL		CITY-ST	- ZIP					
THILE	VP , ·	☐ Delete	TITLE		_			hange	☐ Addition
NAME CIRCEL ADDRESS	PARSON, GAIL		NAME						
STREET ADDRESS CITY-ST-ZIP	1347 N. MANGONIA DR.		STREET A	ADDRESS - ZIP					
	WEST PALM BEACH FL 33401		TITLE					hanna	☐ Addition
TITLE NAME	PARSON, FORREST E.	□ Delete	NAME	1				Hange	L VOOIDO
STREET ADDRESS	1347 N. MANGONIA DR.			ADDRESS					
CITY-ST-ZIP	W.P. BCH FL		CITY-ST	- ZIP					
TITLE		i Delete	TITLE				c	hange	Addition
NAME			NAME						
STREET ADDRESS City-St-Zip		••		ADDRESS					
			CITY-ST-	-218					
TITLE NAME		☐ Delete	TITLE NAME					hange i	Addition Addition
STREET ADDRESS			- 6	ADDRESS					
CITY-SI-ZIP			CITY-ST-	1					
indicated of the cor	certify that the information supplied with f on this report or supplemental report is rporation or the receiver or trustee empored, or on an attachment with an address	true and accurate and that movered to execute this report	ny signature t as require	e shall have the s	same legal effe	ect as if made under oat	h; that I am an	officer or	r director