FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 03 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 334210

(2)

PARKER GROVES INC

SIGNATURE.

Principal Place	TLE DRIVE	Mailing Address 5501 COMMERCE DR C/O T.W. DAVIS ELECTRIC					
ORLANDO FL 32808		ORLANDO FL 32839-2976 US		3. Date incorporated or Qualified	3. Date Incorporated or Qualified		
2. Principal P	lace of Business	2a. Mailing Address		 	4. FEI Number		pplied For
21		26	26		59-1223795		
Suite Apt. #. etc.		Suite, Apt. #, etc.	h		5. Certificate of Status Desired	\$8.75	Additional
22 City & State		27				Fee Ro	equired
23	U	City & State			6. Election Campaign Financing		May Be
Zip	Country	Zip	Count	rv	Trust Fund Contribution 8. This corporation has liability for in		to Fees
24	25	29	30	,		ntangible tax under s Yes No	i. 1 99 .032,
	9. Name and Address of Curre		,,,,,		10. Name and Address of New Reg		
DAV	IS, TERRY W		8	1 Name			
	I OAK ISLAND POINTE RD		8	2 Street Add	dress (P.O. Box Number is Not Acceptable	le)	
BELI	LE ISLE FL 32809		L				
			8	3			
			8	4 City		- 85 Zip	Code
44 Dura ach	10-1	00					
office or re	o the provisions of sections 607.05 egistered agent, or both, in the Statim familiar with, and accept the obli	e of Florida. Such change was	authorized I	by the corpora	poration submits this statement for the pi ation's board of directors. I hereby accep	urpose of changing it the appointment as	ts registered registered
SIGNATURE						•	
12.	Signature, typed or pented name of registered as	jent and title if applicable [NO] ND DIRECTORS		gent signature requ	uired when reinstating)	DATE	
TITLE	PO	DELETE DELETE	13.	1	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	AS IN 12
NAME	DAVIS, TERRY W		1.2 NAM	1		L Change	Managan
STREET ADDRESS	2534 OAK ISLAND POINTE R	Ď		ET ADDRESS			
CITY-ST-ZIP	BELLE ISLE FL	-	1.4 CITY				
TITLE	VD	DELETE	2.1 TITLE			☐ Change	Addition
NAME	PARKER, ROBERT T		2.2 NAMI	ŧ		h · · ·	
STREET ADDRESS	3106 HARGILL DR.		2.3 STRE	ET ADDRESS			
CHY-ST-ZIP	ORLANDO FL		2.4 CITY	-ST-ZIP	.).		
TITLE	STD	DELETE	3.1 TITLE			☐ Change	Addition
NAME	DAVIS, LYNDA P.		3.2 NAM		•		
STREET ADDRESS	2534 OAK ISLAND POINTE R	D	3.3 STRE	ET ADDRESS	•		
CHY-S1-ZIP	BELLE ISLE FL		3.4. CiTY	-\$1-ZIP			
THILE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAM	·			
STREET ADDRESS			4.3 STRE	ET AODRESS			
City - St - ZiP	~	☐ DELETE	4.4 CITY				C 1 (249)
TITLE NAME		□ veicat	5.1 TITLE			L Change	Addition
STREET ADDRESS			5.2 NAM				
CHY-ST-ZIP				ET ADDRESS			
TITLE	1.1. 1911	DELETE	5.4 CITY 6.1 TITLE			☐ Change	Addition
NAME		quantity for the first of the	6.2 NAM			C Change	riodition
STREET ADDRESS			1	ET ADDRESS			ſ.
CITY-ST-ZIP			6.4 CITY				
14. I do heret	by certify that the information supplied	ed with this filing does not quali	fy for the ex	emption state	ed in Section 119.07(3)(i), Florida Statutes	. I further certify that	the
informatio Lam an of	in indicated on this annual report or	supplemental annual report is t or the receiver or trustee empov	true and act vered to exe	curate and tha	at my signature shall have the same legal ort as required by Chapter 607, Florida St	l effect as it made un	der nath: that