

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 24 PM 2:36

DOCUMENT # 389900

(2)

1. Corporation Name

JOHN F. PARSONS INC.

Principal Place of Business

101 EAST KENNEDY BOULEVARD, SUITE 3200
TAMPA FL 33602-5133

Mailing Address

101 EAST KENNEDY BOULEVARD, SUITE 3200
TAMPA FL 33602-5133

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified

10/19/1971

3a. Date of Last Report

06/15/1994

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SALEM, RICHARD J., ESQ.

101 E. KENNEDY BOULEVARD, SUITE 3200
TAMPA FL 33601

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VDS
NAME	KORBMANN, MARIANNE
STREET ADDRESS	SALT CREEK ESTATE
CITY - ST - ZIP	BELIZE DISTRICT BE
TITLE	PD
NAME	SOERENSEN, SOEREN
STREET ADDRESS	#7 GABRIEL LANE
CITY - ST - ZIP	BELIZE CITY, BELIZE
TITLE	D
NAME	BECH, CHRISTIAN
STREET ADDRESS	PEARL ESTATE
CITY - ST - ZIP	COWPEN DISTRICT BE
TITLE	D
NAME	MEHLUM, LAILA
STREET ADDRESS	MONKEY RIVER ESTATE
CITY - ST - ZIP	TOLEDO DISTRICT BE
TITLE	D
NAME	PALMELUNO, KARIN
STREET ADDRESS	SWASEY RIVER ESTATE
CITY - ST - ZIP	COW PEN DISTRICT BE
TITLE	D
NAME	JOERGENSEN, POUL
STREET ADDRESS	82 CEMETARY ROAD
CITY - ST - ZIP	BELIZE CITY BE

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	PALMELUND, KARIN
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MARIANNE KORBMANN, DIRECTOR

3 89900

SALEM, SAXON & NIELSEN

ATTORNEYS AT LAW

Professional Association

STEVEN M. BERMAN
J. FRAZIER CARRAWAY
LISA M. CASTELLANO
MARILYN M. JONES
SHARI L. LEPTON
TROY M. LOVELL
PAUL J. MARINO

BETH COLEMAN MILLER
EVIN L. NETZER
RICHARD A. NIELSEN
BOARD CERTIFIED CIVIL TRIAL LAWYER
LYNN V.H. RAMEY
MARIAN B. RUSH
RICHARD J. SALEM

BERNICE S. SAXON
JACQUELINE M. SPOTO
DAVID J. TONG
CATHERINE M. WADLEY

MARK HUNTER
OF COUNSEL

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

March 16, 1995

The Secretary of State
Division of Corporations
Annual Reports
Caller Service #1500
Tallahassee, FL 32302-1500

Re: John F. Parsons, Inc.
Our File No. 021777.01

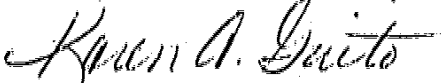
Dear Sir/Madam:

In connection with the above-referenced matter, please find enclosed for filing with your office a fully completed and executed 1995 Corporation Annual Report. In addition, please find enclosed the Corporation's Check No.'s 0094 & 0095, made payable to the Florida Department of State, in the amount of \$200.00 and \$8.75 respectively, to pay the applicable filing fees and certificate of status fees.

If you have any questions regarding the enclosures, please do not hesitate to contact this office. With kindest personal regards, I am

Very truly yours,

SALEM, SAXON & NIELSEN, P.A.



Karen A. Guito
Paralegal

KG/
Enclosures

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3899.00

Additional Directors

7.1 Title	D
7.2 Name	Joergen Olsen
7.3 Street address	Monkey River Estate
7.4 City, St, ZIP	Toldeo District, Belize, Central America