

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 435862

FILED  
Feb 18, 2011  
Secretary of State

Entity Name: W. PARMENTER EXCAVATING, INC.

**Current Principal Place of Business:**

2090 NORTHVIEW ST. NE  
PALM BAY, FL 32905 US

**New Principal Place of Business:**

**Current Mailing Address:**

2090 NORTHVIEW ST. NE  
PALM BAY, FL 32905 US

**New Mailing Address:**

P.O. BOX 61885  
PALM BAY, FL 32906 US

FEI Number: 59-1483682

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLIAM B. PARMENTER JR  
1770 GRANT ROAD  
GRANT, FL 32949 US

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

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

**OFFICERS AND DIRECTORS:**

Title: TD  
Name: PARMENTER, MARY E  
Address: 1598 NEBRASKA ST., N.E.  
City-St-Zip: PALM BAY, FL 32907

Title: DV  
Name: PARMENTER, WILLIAM B SR  
Address: 1598 NEBRASKA ST., N.E.  
City-St-Zip: PALM BAY, FL 32907

Title: DP  
Name: PARMENTER, WILLIAM B JR  
Address: 1770 GRANT RD  
City-St-Zip: GRANT, FL 32949

Title: S  
Name: SWIFT, LINDA L.  
Address: 919 MARIPOSA DR N E  
City-St-Zip: PALM BAY, FL 32905

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 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 all other like empowered.

SIGNATURE: LINDA L SWIFT

S

02/18/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date