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

**PROFIT** CORPORATION **ANNUAL REPORT** 



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

1996

**DOCUMENT # 446388** 

(1)

PARKE	n Name R & PARKER CONSULTAN	ITS, INC.						
Principal Place		Mailing Address			4 FRANKE BIBIL BIBIR BERGE INDE IBIRI	PAN OPPIN DICTOR	BAT OFOTI OIDII BEALL IADI	
800 SECOND SUITE 340 ST PETERSR	AVE. SO. URG FL 33701	800 SECOND AVE. SO. SUITE 340 ST. PETERSBURG FL 3	2704					
US	ONG PC 53701	US	3701		3. Date incorporated or Qualified 02/14/1974		f Last Report 21/1995	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	<u>-</u>	Applied For	
21 26 Suite, Apt. #, etc					59-1506494		Not Applicate	
22		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
Orty & State		City & State			6. Election Campaign Financing \$5.00 May Be			-
Zφ	Country	7 <sub>(p)</sub>	Countr		Trust Fund Contribution		Added to Fees	
25		29 30			This corporation has liability for intangible tax under s 199.032, Florida Statutes     Yes    No			
	9. Name and Address of Curre	ent Registered Agent	81	Nome	10. Name and Address of New F	egistered Aç	jent	
PARKER	, J. Kenneth							
	OND AVE. SO.		82	Street Add	dress (P.O. Box Number is Not Acceptab	ile)		
SUITE 34	10		83					
ST. PETE	ERSBURG FL 33701		84	City			85 Zip Code	
11 Purcuent t	to the provisions of Spotions 607.050	30 and 607 1500 Flavida Civil I	and the share		pration submits this statement for the pur	FL		
familiar wit	eo agent, or both, in the State of Flo th, and accept the obligations of, Sec	inda Such change was authorization 607.0505, Florida Statutes	eal by the com	poration is boa	and radions this statement for the pur and of directors. I hereby accept the appo	pose of chang pintment as re	gistered agent. I am	ı
	Signature, typied or printed name of registerial age			of signature require	ed where relistating:	CATE		
12. TITLE	VTD OFFICERS AI	ND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFF		· · · · · · · · · · · · · · · · · · ·	
NAME	PARKER, (J. KENNETH)		1 1 THILE 1 2 NAME			П	Change Addition	n
STREET ADDRESS 300 1ST AVE S STE 400				T ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG, FL.0		14 CITY-1					
TITLE	PSD	☐ DELETE	2 1 TITLE				Change Addition	n
NAME	LAWRY, (CRAIG)		2.2 NAME			_	_	
STREET ADDRESS	300 1ST AVE S STE 400		2 3 STREE	F ADDRESS				
CITY-ST-7IP	ST. PETERSBURG, FL.0		2 4 CITY - 5	ST - ZIP				
TITLE		☐ DELETE	3 1 1111.8				Change Addition	ı.
NAME			3 2 NAME					
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP TIFLE		☐ DELETE	3 4 CITY - 5	31 - 2)F			<del> </del>	
NAME			4. 1 TITLE			الــا	Change Addition	n
STREET ADDRESS			4.2 NAME					
CITY-ST-ZIP			4.3 STREET					
TITLE		[] DELETE	4.4 Crity - 3 5.1 Tritle	51 - 212			Change	n .
NAME	_		5.2 NAME				Change	'
STREET ADDRESS			53 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY - 9					
TITLE		☐ DELETE	6 1 TITLE	ri - £ff			Change	<del></del>
NAME		—	6.2 NAME			Ų		
STREET ADDRESS			6.3 \$19661	ADDRESS				
CHY-ST-712			EARITY O	1				

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 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplicmental 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR T. KENNETH PRINCER 4/26/96 813822-3432

CR2E034 (12/95)