

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90470 006 \*\*\*150.00

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # 579791**

1. Entity Name  
**PARKER TAMPA TWO, INC.**



Principal Place of Business  
**5365 HARBORSIDE DR  
TAMPA, FL 33615 US**

Mailing Address  
**1700 BROADWAY, 34TH FL  
LEGAL DEPT.  
NEW YORK CITY, NY 10019 US**

**40072915**



04202005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**58-1843429**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**ANDREW SERVICE CORPORATION OF FL  
201 N FRANKLIN ST, STE 2100  
TAMPA, FL 33602**

**DO NOT WRITE  
IN THIS SPACE**

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	GLICK, ADAM
STREET ADDRESS	1700 BROADWAY, 34TH FLOOR
CITY - ST - ZIP	NEW YORK, NY 10019
TITLE	VPDS
NAME	VAGANAY, JEAN-PIERRE
STREET ADDRESS	1700 BROADWAY, 34TH FLOOR
CITY - ST - ZIP	NEW YORK, NY 10019
TITLE	VPD
NAME	<del>GORDON, RICHARD</del> Bradley R. Siegel, Esq.
STREET ADDRESS	1700 BROADWAY, 34TH FLOOR
CITY - ST - ZIP	NEW YORK, NY 10019
TITLE	VPT
NAME	REISMAN, JOHN
STREET ADDRESS	9001 DANIELS PKWY, STE. 200
CITY - ST - ZIP	FORT MYERS, FL 33912
TITLE	AS
NAME	MITCHELL, STEPHEN
STREET ADDRESS	201 N. FRANKLIN STREET, STE 2100
CITY - ST - ZIP	TAMPA, FL 33602
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all officer's empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Jean-Pierre Vaganay, VP*

*4-25-05 (212) 333-3353*

Date

Daytime Phone #