

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701009

FILED
Jan 14, 2009
Secretary of State

Entity Name: PARRY VILLAGE, INC.

Current Principal Place of Business:

4146 88 COURT SOUTH
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

4146 88 COURT SOUTH
BOYNTON BEACH, FL 33436

New Mailing Address:

FEI Number: 59-6064398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JORDAN, EMORY C., III
2328 TENTH AVE NO. SUITE 300
LAKE WORTH, FL 33461 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: P () Delete
Name: HEIKKILA, GERALD
Address: 4187 88 COURT S
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Delete
Name: SMITH, WILF
Address: 4152 88TH PLACE SOUTH
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Delete
Name: LEONARD, LOLA
Address: 4135 88TH CT. S.
City-St-Zip: BOYNTON BEACH, FL 33436

Title: S () Delete
Name: GREEMAN, SUZANNE
Address: 4131 88 PLACE S
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Delete
Name: WILLIAMS, CLAUDETTE,
Address: 4175 88TH PLACE SOUTH
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP () Delete
Name: PONTBRIENT, DONALD
Address: 4140 88TH PL S
City-St-Zip: BOYNTON BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: FREEMAN, SUZANNE
Address: 4131 88 PLACE S
City-St-Zip: BOYNTON BEACH, FL 33436

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: KOONTZ, KENNETH,
Address: 4238 88TH PLACE SOUTH
City-St-Zip: BOYNTON BEACH, FL 33436

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERALD HEIKKILA

P

01/14/2009

Electronic Signature of Signing Officer or Director

Date