

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G15050

FILED
Apr 20, 2005
Secretary of State

Entity Name: PARRISH GROCERY, INC.

Current Principal Place of Business:

2011 CALUSA LAKES BLVD
1101 - 22D AVE WEST
NOKOMIS, FL 34275 US

New Principal Place of Business:

Current Mailing Address:

2011 CALUSA LAKES BLVD.
1101 - 22D AVE WEST
NOKOMIS, FL 34275 US

New Mailing Address:

FEI Number: 59-2245685

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYS, IRENE ANTONETTE
2011 CALUSA LAKES BLVD
NOKOMIS, FL 34275 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: RYS, IRENE ANTONETTE,
Address: 2011 CALUSA LAKES BLVD
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: RYS, JANICE MARY,
Address: 2011 CALUSA LAKES BLVD
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: RYS, JOHN MICHAEL,
Address: 2011 CALUSA LAKES BLVD
City-St-Zip: NOKOMIS, FL 34275

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOHN M RYS

D

04/20/2005

Electronic Signature of Signing Officer or Director

_____ Date