## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # G71601** 1. Entity Name GEORGE PARKER, INC.

**FILED** Feb 18, 2008 08:00 AM Secretary of State

Principal Place of Business

16731 MCGREGOR BLVD. SUITE 101

FT MYERS, FL 33908 US

Mailing Address

16731 MCGREGOR BLVD. SUITE 101 FT MYERS, FL 33908 US



## DO NOT WRITE IN THIS SPACE

01042008	No Chg-P	CR2E034 (11/05)	
4. FEI Number			Applied For
59-2355	093		Not Applicable

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

6. Name and Address of Current Registered Agent

PARKER, GEORGE M. 5727 SANIBEL - CAPTIVA RD SANIBEL, FL 33957

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the $\rho$ ions of registered agent.	urpose of changing its register	ed office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATUPE	Signature, typed or printed name of registered agent and little if	applicable. (NOTE Registere	d Agent signature	required when roinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. Shaded to Fees			U00000830006 02/26/08-80066-004 150.00	
10. TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND DIRECT PTD PARKER, GEORGE M. 5727 SANIBEL-CAPTIVA RD SANIBEL, FL 33957	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD PARKER, VIRGINIA L. 5727 SANIBEL-CAPTIVA RD SANIBEL, FL 33957			·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				· <del></del>	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Andrews 16 mag			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	. જેલા	Ř.			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officier or director of the control of the contro						

changed, or on an attachment wi

SIGNATURE