2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H10664

FILED Feb 08, 2010 Secretary of State

Entity Name: PARENT MANAGEMENT CO., INC.

Current Principal Place of Business: New Principal Place of Business:

613 S. 12TH STREET LEESBURG, FL 34748 US

Current Mailing Address: New Mailing Address:

613 S. 12TH STREET LEESBURG, FL 34748 US

FEI Number: 59-2471426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAGALSKI, BARBARA A 613 S. 12TH STREET LEESBURG, FL 34749 US

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: PST

Name: MAGALSKI, BARBARA A Address: 613 S. 12TH STREET City-St-Zip: LEESBURG, FL 34748

Title: D

Name: MAGALSKI, BARBARA A Address: 613 S. 12TH STREET City-St-Zip: LEESBURG, FL 34748

Title: \

 Name:
 MAGALSKI, DAVID

 Address:
 613 S. 12TH STREET

 City-St-Zip:
 FRUITLAND PARK, FL 34748

Title: DIR

Name: MAGALSKI, SHELLEY A
Address: 613 SOUTH 12TH STREET
City-St-Zip: LEESBURG, FL 34748

Title: DIR

Name: MAGALSKI, JAMES H Address: 613 SOUTH 12TH STREET City-St-Zip: LEESURG, FL 34748

Title: DIR

Name: MAGALSKI, SANDRA D Address: 613 SOUTH 12TH STREET City-St-Zip: LEESBURG, FL 34748

I hereby 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 all other like empowered.

SIGNATURE: BARBARA MAGALSKI PRES 02/08/2010