

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J02824

1. Corporation Name

PARKER Beach Restoration Inc.

Principal Place of Business

2032 Krape Rd.
Naples FL

Mailing Address

P.O. Box 990706
NAPLES, FL 34116

2. Principal Place of Business

21 2032 Krape Rd

Suite, Apt. #, etc.

22 City & State

23 Naples FL 34116

Zip

Country

24 Collier

2a. Mailing Address

26 P.O. Box 990706

Suite, Apt. #, etc.

27 City & State

28 Naples, FL

Zip

29 34116

Country

30 Collier

9. Name and Address of Current Registered Agent

WILLIAM L. PARKER
2032 Krape Rd.
Naples, FL 34116

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when terminating)

DATE

12. PRESIDENT AND DIRECTORS

TITLE WILLIAM PARKER [] DELETE

NAME P.O. Box 990706

STREET ADDRESS Naples FL 34116

CITY-ST-ZIP

TITLE DIRECTOR [] DELETE

NAME LINDA R. PARKER

STREET ADDRESS P.O. Box 990706

CITY-ST-ZIP NAPLES, FL 34116

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William L. Parker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APPROVED
AND
FILED

1062

99 MAY 24 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4. FEI Number

59-264-9503

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax

[] Yes [] No

10. Name and Address of New Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

000002887700-0

-05/26/99-01105-016

***158.75 ***158.75

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

UB
524-99

5/24/99

941-455-9130

CR2E034 (11/98)

5/24/99

WfZ

To: Dept. of State
Div. of Corporations

Parker Beach Restoration Inc. did not receive Corporate Annual Renewal form for 1999 in that we mailed and the Postal Service would not forward mail due to the fact our son still occupied the post office box. Evidently our son neglected to forward this mail to me.

We were unable to address this renewal before now as I was hospitalized the month of April 1999 and underwent open-heart surgery during this time.

William L. Parker