

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J33565

(9)

1. Corporation Name

PARKER MANAGEMENT, INC.

Principal Place of Business

**6296 CORPORATE CT
A101
FT. MYERS FL 33919
US**

Mailing Address

**6296 CORPORATE CT
A101
FT. MYERS FL 33919
US**

**APPROVED
AND
FILED**

95 APR 27 AM 9:21

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/16/1986

3a. Date of Last Report

04/27/1994

4. FEI Number

59-2736349

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**

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**MITCHELL, STEPHEN J.
201 N FRANKLIN STREET, STE 2100
TAMPA FL 33602**

10. Name and Address of New Registered Agent

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 the if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DV**
NAME **PARKER, JACK**
STREET ADDRESS **2800 S OCEAN BLVD**
CITY-ST-ZIP **BOCA RATON FL**

TITLE **PSTD**
NAME **TURKEN, WALTER D.**
STREET ADDRESS **6296 CORPORATE CT A101**
CITY-ST-ZIP **FT. MYERS FL**

TITLE **V**
NAME **LEEMAN, JACK**
STREET ADDRESS **6296 CORPORATE CT A101**
CITY-ST-ZIP **FT. MYERS FL**

TITLE **D**
NAME **GLICK, ADAM**
STREET ADDRESS **104-70 QUEENS BLVD**
CITY-ST-ZIP **FOREST HILLS NY**

TITLE **AS**
NAME **MITCHELL, STEPHEN J.**
STREET ADDRESS **201 N FRANKLIN ST #2100**
CITY-ST-ZIP **TAMPA FL**

TITLE **AVP**
NAME **STELLING, SARA L**
STREET ADDRESS **6296 CORPORATE CT A101**
CITY-ST-ZIP **FT MYERS FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

P D

**David Knizner
6296 Corporate Ct. Ste A101
Ft. Myers FL 33919**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4), 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 this 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.

SIGNATURE:

STELLING SARA L. STELLING

4/21/95

(813) 481-5040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

PHONE NUMBER

J33565

DOCUMENT NUMBER #J33565

PARKER MANAGEMENT, INC.
6296 CORPORATE COURT, SUITE A101
FT. MYERS, FL 33919

FEI NUMBER 59-2736349

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS -- CONTINUED

ADDITION

TITLE	T S
NAME	JOHN REISMAN
STREET ADDRESS	6296 CORPORATE COURT, SUITE A101
CITY-ST-ZIP	FT. MYERS, FL 33919