

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J96651

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: LOUIS PARRISH & ASSOCIATES, INC.

## Current Principal Place of Business:

C/O BRIAN E. FITZGERALD  
320 W PARK AVENUE  
TALLAHASSEE, FL 32301 US

## New Principal Place of Business:

320 W PARK AVENUE  
TALLAHASSEE, FL 32301 US

## Current Mailing Address:

C/O BRIAN E. FITZGERALD  
320 W PARK AVENUE  
TALLAHASSEE, FL 32301 US

## New Mailing Address:

320 W PARK AVENUE  
TALLAHASSEE, FL 32301 US

FEI Number: 59-2850944

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FITZGERALD, BRIAN E  
903 1/2 N MONROE ST  
TALLAHASSEE, FL 32303 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: PARRISH, LOUIS  
Address: 320 W PARK AVENUE  
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: D ( ) Delete  
Name: FITZGERALD, BRIAN E  
Address: 903 1/2 N MONROE ST  
City-St-Zip: TALLAHASSEE, FL 32303 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 exemption stated 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 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: LOUIS B PARRISH

PD

04/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date