

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L11841

FILED
Jan 05, 2012
Secretary of State

Entity Name: PARKERVISION, INC.

Current Principal Place of Business:

7915 BAYMEADOWS WAY
SUITE 400
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

7915 BAYMEADOWS WAY
SUITE 400
JACKSONVILLE, FL 32256 US

New Mailing Address:

FEI Number: 59-2971472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOLPE, TIMOTHY W ESQ.
501 RIVERSIDE AVE., 7TH FLOOR
JACKSONVILLE, FL 32202 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

OFFICERS AND DIRECTORS:

Title: CD
Name: PARKER, JEFFREY
Address: 7915 BAYMEADOWS WAY, STE 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: DCTO
Name: SORRELS, DAVID
Address: 7915 BAYMEADOWS WAY, STE 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: METCALF, JOHN
Address: 7915 BAYMEADOWS WAY, STE 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: HIGHTOWER, WILLIAM
Address: 7915 BAYMEADOWS WAY, STE 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: STERNE, ROBERT G
Address: 7915 BAYMEADOWS WAY, STE 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: CFO
Name: POEHLMAN, CYNTHIA L
Address: 7915 BAYMEADOWS WAY, STE 400
City-St-Zip: JACKSONVILLE, FL 32256

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: CYNTHIA POEHLMAN

CFO

01/05/2012

Electronic Signature of Signing Officer or Director

Date