## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT # L25452**

1. Entity Name

PARRISH MANAGEMENT, INC.



**FILED** May 01, 2006 08:00 Al Secretary of State

Principal Place of Business

% JESSE J. PARRISH. III 2900 PARRISH RD.

TITUSVILLE, FL 32781-0339

Mailing Address

% JESSE J. PARRISH, III 2900 PARRISH RD. TITUSVILLE, FL 32781-0339



## DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04102006 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 59-2975558 Not Applicable \$8.75 Additional 

5. Certificate of Status Desired

Fee Required

<u> 321-267-1831</u>

6. Name and Address of Current Registered Agent

PARRISH, JESSE J., III 1013 INDIAN RIVER AVENUE TITUSVILLE, FL 32780

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.			· -	\$5.00 May Be Added to Fees	
10,	OFFICERS AND DIREC	TORS		<del>.</del>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST PARRISH, JESSE J., III 1013 INDIAN RIVER AVENUE TITUSVILLE, FL				000000545415 05/11/06-80075-017 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>-</sup>	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				-	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.					