2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 17, 2006 8:00 am Secretary of State **DOCUMENT # M09390** 1. Entity Name 02-17-2006 90063 026 ***150.00 PARROT DEVELOPMENT, INC. Principal Place of Business Mailing Address 1831 GLENCOE RD 1831 GLENCOE RD 60017425 WINTER PARK, FL 32789 WINTER PARK, FL 32789 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042006 CR2E034 (11/05) Chg-P Applied For City & State City & State 4. FEI Number 59-2491755 Not Applicable Country Ζb Zip \$8.75 Additional Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Name and Address of New Registered Agent JOHNS, RICHARD W. Street Address (P.O. Box Number is Not Acceptable) **1801 GLENCOE ROAD** WINTER PARK, FL 32789 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FiLE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Change ☐ Addition Delete TITLE JOHNS, RICHARD W. NAME NAME STREET ADDRESS **1801 GLENCOE ROAD** STREET ADDRESS CITY-ST-ZIP CTTY-ST-7P WINTER PARK, FL Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME HALLE STREET ADDRESS STREET ACCRESS CITY-ST-ZIP CITY-ST-ZIP-☐ Change ■ Addition TITLE ☐ Deteta TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE Delete NAME NAME STREET ADORESS STREET ADDRESS CTY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this lifting does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the Information indicated on this report or supplemental upon is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director QUixed by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver of changed, or on an attachment with SIGNATURE: Devime Phone

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