

**FILED**  
**Mar 01, 1999 8:00 am**  
**Secretary of State**

03-01-1999 90164 050 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # M68658**

1. Corporation Name

**PARSLEY REAL ESTATE OF PINELLAS COUNTY, INC.**

Principal Place of Business

 2325 9TH ST. N.  
 ST. PETERSBURG FL 33704  
 US

Mailing Address

 2325 9TH ST NO.  
 ST. PETERSBURG FL 33704  
 US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

02/18/1988

4. FEI Number

59-2884639

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

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City &amp; State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City &amp; State

29 Zip

Country

9. Name and Address of Current Registered Agent

 PARSLEY, EDWIN D., JR.  
 100 RIVIERA WAY NE  
 ST. PETERSBURG FL 33704

10. Name and Address of New Registered Agent

81 Name

PARSLEY, EDWIN D., SR.

82 Street Address (P.O. Box Number is Not Acceptable)

100 Riviera Way NE

83

St. Petersburg, FL 33704

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

 Edwin D. Parsley, Sr.  
 Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

3/17/99

12. OFFICERS AND DIRECTORS

 TITLE ☐ DELETE

 NAME D  
 STREET ADDRESS PARSLEY, EDWIN D., SR.  
 CITY-ST-ZIP 100 RIVIERA WAY NE  
 ST. PETERSBURG FL

 TITLE ☐ DELETE

 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

 TITLE ☐ DELETE

 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

 TITLE ☐ DELETE

 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

 TITLE ☐ DELETE

 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

 TITLE ☐ DELETE

 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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 ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edwin D. Parsley, Sr. 2/2/99 727-896-7575

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)