2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURÉ

Sep 10, 2008 8:00 am Secretary of State DOCUMENT # N00000006583 1. Entity Name 7 09-10-2008 90001 045 ****70 00 ROSS AND BARBARA PARKER FOUNDATION, INC. Principal Place of Business Mailing Address 4720 W CYPRESS ST. 4720 W CYPRESS ST. SUITE 200 TAMPA FL 33607 SUITE 200 TAMPA FL 33607 2. Princ Place of Business - No P.O. Box # 3. Mailing Address 3604 W. SWANN AVE Suite, Apt. #. etc. Suite, Apt. #, etc. CR2E037 (4/08) 2nd MOORE City & State City & State 4. FEI Number Applied For 59-3678394 IAMPA, FL Not Applicable Country \$8.75 Additional ৰ্ম 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BARBARA W. PARKER PARKER, BARBARA W -4720 W CYPRESS ST. SUITE 200 **TAMPA FL 33607** 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 chalure, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By September 3, 2008 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PARKER, BARBARA W. 3604 W. SWANN AVE. TITLE TITLE ☐ Delete PAPKER, BARBARA W NAME NAME 4720 W CYPRESS ST. 2ND FL STREET ADDRESS STREET ADDRESS CITY-ST-7IP **TAMPA FL 33607** TAMPA, FL 33609 CITY-ST-7IP TELLE ☐ Delete TITLE PARKER JEFFREY R. PARKER, JEFFREY R NAME NAME 3604 W. SWANN AVE. 4720 W CYPRESS ST, 2ND FL STREET ADDRESS STRÉET ADDRESS TAMPA FL 33607 CITY-ST-7IP CITY-ST-ZIP TAMPA, FL 33609 TITLE ☐ Delete TITLE Addition CAMERON, KAREN P. NAME CAMERON, KAREN P 3604 W. SWANN AVE. STREET ADDRESS 4720 W CYPRESS ST, 2ND FL STREET ADDRESS CITY-ST-7IP TAMPA FL 33607 TAMPA, FL 33609 CITY-ST-ZIP Change TITLE ☐ Delete TITLE ☐ Addition PARKER, THADDEUS C. NAME PARKER, THADDEUS C IV NAME 3604 W. SWANN AVE. STREET ADDRESS 4720 W CYPRESS ST, 2ND FL STREET ADDRESS **TAMPA FL 33607** CITY-ST-ZIP TITLE ☐ Delete Change TITLE ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 617, 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 like empowered.

FILED