

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010738

FILED
Jan 17, 2012
Secretary of State

Entity Name: THE VILLAGES PARROT HEAD CLUB, INC.

Current Principal Place of Business:

2467 SALUDA STREET
THE VILLAGES, FL 32162 UN

New Principal Place of Business:

Current Mailing Address:

PO BOX 52
OXFORD, FL 34484 00

New Mailing Address:

FEI Number: 20-0503184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWLETT, CHARLIE
962 CARIBOU WAY
THE VILLAGES, FL 32162 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: P
Name: HOWLETT, CHARLIE
Address: 962 CARIBOU WAY
City-St-Zip: THE VILLAGES, FL 32162

Title: SECR
Name: SIMPSON, BONNIE
Address: 2056 CALLAWAY DRIVE
City-St-Zip: THE VILLAGES, FL 32162

Title: V
Name: HARRINGTON, JERRY
Address: 2573 BAINBRIDGE WAY
City-St-Zip: THE VILLAGES, FL 32162

Title: T
Name: STONE, WILL
Address: 2467 SALUDA STREET
City-St-Zip: THE VILLAGES, FL 32162

Title: TRUS
Name: TITUS, REN
Address: 3256 HOPEWELL STREET
City-St-Zip: THE VILLAGES, FL 32162

Title: TRUS
Name: LABONTE, TRUDY
Address: 1480 VANBUREN WAY
City-St-Zip: THE VILLAGES, FL 32162

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILL STONE

T

01/17/2012

Electronic Signature of Signing Officer or Director

Date