

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N0400010825

1. Entity Name

CHRIS PARKER CHARITABLE FOUNDATION, INC.



FILED

05 OCT 11 AM 9:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1st MOORE CR2E037 (10/04)

Principal Place of Business

PO BOX 428
PINELLAS PARK FL 33780

Mailing Address

PO BOX 428
PINELLAS PARK FL 33780

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-1912670

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANNIS, NATALIE C ESQ
201 N FRANKLIN STREET SUITE 2000
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

10-7-05

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME PARKER, WILLIAM L
STREET ADDRESS 5829 106TH TERRACE
CITY-ST-ZIP PINELLAS PARK FL 33782

TITLE D ☐ Delete
NAME FRICK, ELAINE
STREET ADDRESS 234 PINE RIDGE DRIVE
CITY-ST-ZIP EASLEY SC 29642

TITLE D ☐ Delete
NAME FORCA, JODI
STREET ADDRESS 3510 WEST LEONA STREET
CITY-ST-ZIP TAMPA FL 33629

TITLE D ☐ Delete
NAME SEARS, CHRIS
STREET ADDRESS 3810 DELEON
CITY-ST-ZIP TAMPA FL 33609

TITLE D ☐ Delete
NAME PARKER, LISETTE
STREET ADDRESS 804 POST OAK DRIVE
CITY-ST-ZIP MOUNT PLEASANT SC 29466

TITLE D ☐ Delete
NAME MAYO, SUSAN
STREET ADDRESS 9 STONO COURT
CITY-ST-ZIP BEAUFORT SC 29902

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME BRAGG CRANE
STREET ADDRESS 2032 MASS. AVE. N.E.
CITY-ST-ZIP ST PETERSBURG FL 33703

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

WILLIAM L. PARKER 10-7-05

727-547-8401