

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003082

FILED
Apr 20, 2007
Secretary of State

Entity Name: PARLEY PIONEERS INC.

Current Principal Place of Business:

516 ROBBINS REST CIRCLE
DAVENPORT, FL 33896

New Principal Place of Business:

Current Mailing Address:

516 ROBBINS REST CIRCLE
DAVENPORT, FL 33896

New Mailing Address:

8297 CHAMPIONSGATE BLVD. #311
CHAMPIONSGATE, FL 33896

FEI Number: 20-4537521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PARSON, GEISELA E
516 ROBBINS REST CRICLE
DAVENPORT, FL 33896 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: PD () Delete
Name: PARSON, GEISELA E
Address: 516 ROBBINS REST CIRCLE
City-St-Zip: DAVENPORT, FL 33896

Title: TD () Delete
Name: PARSON, TERRY E
Address: 1150 ORNE CT.
City-St-Zip: KISSIMMEE, FL 34747

Title: S () Delete
Name: MORANT, ADRIANA
Address: 2984 CONNER LANE
City-St-Zip: DAVENPORT, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: GEISELA PARSON

PD

04/20/2007

Electronic Signature of Signing Officer or Director

Date