## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000003082

City-St-Zip:

DAVENPORT, FL 34741

FILED Apr 22, 2008 Secretary of State

Entity Name: PARLEY PIONEERS INC. **Current Principal Place of Business: New Principal Place of Business:** 516 ROBBINS REST CIRCLE DAVENPORT, FL 33896 **Current Mailing Address: 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 ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PARSON, GEISELA E 516 ROBBINS REST CRICLE DAVENPORT, FL 33896 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PARSON, GEISELA E Name: Name: Address: 516 ROBBINS REST CIRCLE Address: City-St-Zip: DAVENPORT, FL 33896 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PARSON, TERRY E Name: Address: 1150 ORNE CT. Address: City-St-Zip: KISSIMMEE, FL 34747 City-St-Zip: Title: () Delete Title: () Change () Addition MORANT, ADRIANA Name: Name: 2984 CONNER LANE Address: Address:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: GEISELA PARSON MS 04/22/2008