

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N08000002999

Entity Name: PARROT HEADS OF PENSACOLA, INC.

Current Principal Place of Business:

3860 CREIGHTON RD.
#14
PENSACOLA, FL 32504 US

New Principal Place of Business:

Current Mailing Address:

3860 CREIGHTON RD.
#14
PENSACOLA, FL 32504 US

New Mailing Address:

FEI Number: 20-0425489 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WASHINGTON, BOBBY L
3860 CREIGHTON RD.
#14
PENSACOLA, FL 32504 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 () Delete
Name: VINCENT, TIM
Address: 8196 LUCENA STREET
City-St-Zip: NAVARRE, FL 32566 US

Title: VP () Delete
Name: WASHINGTON, BOBBY L
Address: 3860 CREIGHTON ROAD #14
City-St-Zip: PENSACOLA, FL 32504 US

Title: S () Delete
Name: VICK, PAM
Address: 3845 DURANGO DRIVE
City-St-Zip: PENSACOLA, FL 32504 US

Title: T () Delete
Name: WARD, CATHY
Address: 7411 SIR EDEN ROAD
City-St-Zip: PENSACOLA, FL 32526 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HUBBARD, WILLIE
Address: 560 BATTEN BLVD.
City-St-Zip: PENSACOLA, FL 32507 US

Title: VP (X) Change () Addition
Name: WILLIAMS, KEITH
Address: 10162 SUGAR CREEK CIRCLE
City-St-Zip: PENSACOLA, FL 32514 US

Title: S (X) Change () Addition
Name: CAPEN, GARY
Address: 4901 PINEVIEW RIDGE RD.
City-St-Zip: PACE, FL 32571 US

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

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.

SIGNATURE: WILLIE HUBBARD

P

04/13/2009

Electronic Signature of Signing Officer or Director

_____ Date