


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P00000047056
 1. Entity Name
PARKER DANIELS, INC.



Principal Place of Business
**9001 DANIELS PKWY., STE 200
 FORT MYERS, FL 33912**

Mailing Address
**9001 DANIELS PKWY., STE 200
 FORT MYERS, FL 33912**

DO NOT WRITE IN THIS SPACE



04102007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1040504

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**ANDREW SERVICE CORPORATION OF FLORIDA
 201 N FRANKLIN ST
 SUITE 2100
 TAMPA, FL 33602**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLICK, ADAM 9001 DANIELS PKWY., STE 200 FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP REISMAN, JOHN 9001 DANIELS PKWY., STE 200 FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GULLO, VINCENT 9001 DANIELS PKWY., STE 200 FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTS KNIZNER, DAVID 9001 DANIELS PKWY., STE 200 FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/02/07-80058-006 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: DAVE KNIZNER 4/16/07 239.481.5040 x 201
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #