

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000058539

1. Entity Name  
PARKER CONSTRUCTION & REPAIRS, INC.

**FILED**  
Feb 06, 2001 8:00 am  
Secretary of State

02-06-2001 90299 050 \*\*\*158.75

Principal Place of Business  
649 CASS STREET  
DELAND FL 32720

Mailing Address  
649 CASS STREET  
DELAND FL 32720

2. Principal Place of Business  
832 E. New York ave  
Suite, Apt. #, etc.

3. Mailing Address  
932 E New York ave  
Suite, Apt. #, etc.

City & State  
Deland

City & State  
Deland

4. FEI Number  
59-3652777  
Applied For  
Not Applicable

Zip  
Fla

Country  
Volusia

Zip  
32724

Country  
Volusia

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

6. Name and Address of Current Registered Agent  
PARKER, RAYMOND  
649 CASS STREET  
DELAND FL 32720

7. Name and Address of New Registered Agent  
Name  
Parker, Raymond C Jr  
Street Address (P.O. Box Number is Not Acceptable)  
832 E. New York ave  
City  
Deland FL Zip Code  
32724

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.

SIGNATURE  
Raymond C Parker Jr  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  
DATE  
1-31-01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS	
TITLE D NAME DELAND, RAYMOND C STREET ADDRESS 649 CASS STREET CITY-ST-ZIP DELAND FL 32720	<input checked="" type="checkbox"/> Delete
TITLE owner / president NAME Parker, Raymond C Jr STREET ADDRESS 832 E New York ave CITY-ST-ZIP Deland, Fla 32724	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D NAME Parker, Raymond C Jr STREET ADDRESS 832 E. New York ave CITY-ST-ZIP Deland, Fla 32724	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other persons empowered.

SIGNATURE: Raymond C Parker Jr  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
DATE  
1-31-01 904-747-0107  
Daytime Phone #

CR2E034 (10/00)