

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000100862

Entity Name: PARRISH FARMS, INC.

FILED
Apr 13, 2006
Secretary of State

Current Principal Place of Business:

5770 NE 87TH COURT
HIGH SPRINGS, FL 32655

New Principal Place of Business:

Current Mailing Address:

PO BOX 2365
HIGH SPRINGS, FL 32655

New Mailing Address:

FEI Number: 59-3696700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRISH, KAREN F
5770 NE 87TH COURT
HIGH SPRINGS, FL 32655 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PARRISH, KAREN
Address: 5770 NE 87TH CRT
City-St-Zip: HIGH SPRINGS, FL 32643

Title: D () Delete
Name: PARRISH, ALVA W
Address: 5660 NE 87TH CRT
City-St-Zip: HIGH SPRINGS, FL 32643

Title: VD () Delete
Name: PARRISH, GEORGE W SR
Address: 5660 NE 87TH CRT
City-St-Zip: HIGH SPRINGS, FL 32643

Title: ST () Delete
Name: PARRISH, GEORGE W JR
Address: 5770 NE 87TH CRT
City-St-Zip: HIGH SPRINGS, FL 32643

Title: VD () Delete
Name: PARRISH, JUSTIN W
Address: 5770 NE 87TH CRT
City-St-Zip: HIGH SPRINGS, FL 32643

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN PARRISH

PD

04/13/2006

Electronic Signature of Signing Officer or Director

Date