2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 23, 2004 8:00 am Secretary of State DOCUMENT # P01000028217 04-23-2004 90249 005 ***158.75 WILLIE L. PARKER, JR. & ASSOCIATES, INCORPORATED Principal Place of Business Mailing Address 2613 CRESTFIELD DRIVE 2613 CRESTFIELD DRIVE **ራ**ሟህሁ~~~ VALRICO FL 33594 VALRICO FL 33594 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 59-3679433 Not Applicable Ziρ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOHNSON, FRANK T Street Address (P.O. Box Number is Not Acceptable) 2402 MARTIN L. KING JR. BLVD, STE 2 **TAMPA FL 33610** City Zip Code 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 Signature, typed or printed name of registered agont and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DP TITLE □ Delete TITLE Change ☐ Addition PARKER, WILLIE L JR NAME NAME STREET ADDRESS 2613 CRESTFIELD DRIVE STREET ADDRESS CITY-ST-ZIP VALRICO FL 33594 CITY-ST-7IP Dν TITLE ☐ Delete TITLE Change ☐ Addition PARKER, ROBIN L NAME NAME STREET ADDRESS 2613 CRESTFIELD DRIVE STREET ADDRESS VALRICO FL 33594 CITY-ST-ZIP CITY-ST-ZIP TITLE D۷ ☐ Delete TITLE Change ☐ Addition NAME BODIFORD, IRIS NAME STREET ADDRESS 2613 CRESTFIELD DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VALRICO FL 33594 DST TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME PARKER, MELANIE 2613 CRESTFIELD DRIVE STREET ADDRESS STREET ADDRESS VALRICO FL 33594 CITY-ST-7IP CITY-ST-7IP D۷ TITLE ☐ Delete TITLE Change ☐ Addition PARKER, WILLIE L III NAME NAME 2613 CRESTFIELD DRIVE STREET ADDRESS STREET ADDRESS VALRICO FL 33594 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP

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and that my name appears in Block 10 or Block 11 if

12. 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 10 or Block 11 in changed, or on an attachment with an address, with all other like empowered. SIGNATURE: