

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000042676

FILED
Sep 05, 2007
Secretary of State

Entity Name: LAW OFFICE OF STARR PARKER, P.A.

Current Principal Place of Business:

902 W. LUMSDEN RD., SUITE 105
BRANDON, FL 33511 US

New Principal Place of Business:

Current Mailing Address:

902 W. LUMSDEN RD., SUITE 105
BRANDON, FL 33511 US

New Mailing Address:

P.O. BOX 3353
RIVERVIEW, FL 33568 US

FEI Number: 81-0644246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STARR, PARKER ESQUIRE
13505 COPPER BELLY CT
RIVERVIEW, FL 33569 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: PARKER, STARR ESQUIRE
Address: 902 W. LUMSDEN RD., SUITE 105
City-St-Zip: BRANDON, FL 33511 US

Title: TREA () Delete
Name: PARKER, STARR ESQUIRE
Address: 902 W. LUMSDEN RD., SUITE 105
City-St-Zip: BRANDON, FL 33511

Title: SEC () Delete
Name: PARKER, STARR ESQUIRE
Address: 902 W. LUMSDEN RD., SUITE 105
City-St-Zip: BRANDON, FL 33511 US

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:

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

SIGNATURE: STARR PARKER

O/D

09/05/2007

Electronic Signature of Signing Officer or Director

Date