

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060759

FILED  
Apr 17, 2006  
Secretary of State

Entity Name: PARKER TOPLIFF VENTURES, INC.

## Current Principal Place of Business:

17571 ROCKEFELLER CIRCLE  
FORT MYERS, FL 33912

## New Principal Place of Business:

## Current Mailing Address:

574 SANFORD DR.  
FORT MYERS, FL 33919

## New Mailing Address:

542 PRATHER DR.  
FORT MYERS, FL 33919

FEI Number: 20-1008621

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TOPLIFF, KATHLEEN  
574 SANFORD DRIVE  
FORT MYERS, FL 33919 US

## Name and Address of New Registered Agent:

TOPLIFF, KATHLEEN  
542 PRATHER DR.  
FORT MYERS, FL 33919 US

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:

04/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PARKER, ROBERT J  
Address: 1521 MARAVILLA AVENUE  
City-St-Zip: FORT MYERS, FL 33901

Title: VD ( ) Delete  
Name: TOPLIFF, JACK  
Address: 574 SANFORD DRIVE  
City-St-Zip: FORT MYERS, FL 33919

Title: ST ( ) Delete  
Name: TOPLIFF, KATHLEEN  
Address: 574 SANFORD DRIVE  
City-St-Zip: FORT MYERS, FL 33919

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: TOPLIFF, JACK  
Address: 542 PRATHER DRIVE  
City-St-Zip: FORT MYERS, FL 33919

Title: ST (X) Change ( ) Addition  
Name: TOPLIFF, KATHLEEN  
Address: 542 PRATHER DRIVE  
City-St-Zip: FORT MYERS, FL 33919

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: KATHLEEN TOPLIFF

ST

04/17/2006

Electronic Signature of Signing Officer or Director

Date