

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90318 012 \*\*\*150.00



**DOCUMENT # P93000063253**  
 1. Entity Name  
 PARKER-RALEIGH DEVELOPMENT XX, INC.

Principal Place of Business 201 N FRANKLIN STREET SUITE 2100 TAMPA, FL 33602	Mailing Address 201 N FRANKLIN STREET SUITE 2100 TAMPA, FL 33602
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2. Principal Place of Business 5500 Atlantic Springs Road Suite, Apt. #, etc. Suite 103	3. Mailing Address 5500 Atlantic Springs Road Suite, Apt. #, etc. Suite 103
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03192004 Chg-P CR2E034 (10/03)

City & State Raleigh, NC	City & State Raleigh, NC	4. FEI Number 59-3204157	Applied For Not Applicable
Zip 27616	Country USA	Zip 27616	Country USA

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  
 EDWARDS, JOSEPH D  
 201 N FRANKLIN STREET  
 SUITE 2100  
 TAMPA, FL 33602

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City  
 FL 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT PARKER, JACK 118 W. 57TH STREET NEW YORK, NY	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAS MITCHELL, STEPHEN J 201 N FRANKLIN STREET SUITE 2100 TAMPA, FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS BRADY, DAVID L. 5500-103 ATLANTIC SPRINGS RD. RALEIGH, NC	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD GLICK, ADAM 118 W 57TH STREET NY, NY 10019	<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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/AS/D Glick, Adam P. 1700 Broadway Avenue 34th Floor New York, NY 10019	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S Brady, David L. 5500-103 Atlantic Springs Road Raleigh, NC 27616	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/AS Gordon, Richard C. 1700 Broadway Avenue 34th Floor New York, NY 10019	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T Vaganay, Jean-Pierre 1700 Broadway Avenue 34th Floor New York, NY 10019	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/AT O'Larnic, Nancy C. 5500-103 Atlantic Springs Road Raleigh, NC 27616	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/AS Fuller, Kenneth 5500-103 Atlantic Springs Road Raleigh, NC 27616	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nancy C. O'Larnic 4/7/04 919-872-9000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

*Nancy C. O'Larnic*

*Attachment*

<b>DOCUMENT #P93000063253</b>			
1. Entity Name <b>PARKER-RALEIGH DEVELOPMENT XX, INC.</b>			
2. Principal Place of Business 5500 Atlantic Springs Road		2. Mailing Address 5500 Atlantic Springs Road	
Suite, Apt. #, etc Suite 103		Suite, Apt. #, etc Suite 103	
City & State Raleigh, NC		City & State Raleigh, NC	
4. FEI Number 59-3204157			
Zip 27616	Country USA	Zip 27616	Country USA

11. Additions/Changes to Officers and Directors in 11					
<b>TITLE</b>	V/AS	<input type="checkbox"/>	<b>Change</b>	<input checked="" type="checkbox"/>	<b>Addition</b>
<b>NAME</b>	Ratledge, Toler W.				
<b>STREET ADDRESS</b>	5500-103 Atlantic Springs Road				
<b>CITY-ST-ZIP</b>	Raleigh, NC 27616				
<b>TITLE</b>	AS	<input type="checkbox"/>	<b>Change</b>	<input checked="" type="checkbox"/>	<b>Addition</b>
<b>NAME</b>	Poor, Vickie B.				
<b>STREET ADDRESS</b>	5500-103 Atlantic Springs Road				
<b>CITY-ST-ZIP</b>	Raleigh, NC 27616				