

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000088172

Entity Name: PARCHER CORPORATION

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

302A 15120 PORTS OF IONA DR.
FT. MYERS, FL 33908 US

New Principal Place of Business:

Current Mailing Address:

302 A 15120 PORTS OF IONA DR
FT. MYERS, FL 33908 US

New Mailing Address:

FEI Number: 52-0810620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARCHER, JAMES H
302 A 15120 PORTS OF IONA DRIVE
FT. MYERS, FL 33908 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: PARCHER, JAMES H
Address: 302 A PORTS OF IONA DRIVE
City-St-Zip: FT.MYERS, FL

Title: STD () Delete
Name: PARCHER, JEAN W
Address: 302 A PORTS OF IONA DRIVE
City-St-Zip: FT. MYERS, FL

Title: VD () Delete
Name: PARCHER, KENNETH B
Address: 190 208 GEORGE STREET
City-St-Zip: CHESAPEAKE CITY, MD 21915

Title: D () Delete
Name: PARCHER, DAVID W
Address: 11479 STATION RD.
City-St-Zip: WORTON, MD

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES H. PARCHER

PRES

01/05/2005

Electronic Signature of Signing Officer or Director

Date