2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000009014

Address:

City-St-Zip:

2360 SE 173RD COURT

SILVER SPRINGS, FL 34488 US

Entity Name: J. PARKER INSURANCE AGENCY, INC.

FILED Apr 14, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Pusiness	
Current	rincipal Place	e or business:	New Principal Place of	New Principal Place of Business:	
703 ROBE HIXSON, F	ERTS MILL RC FL 37343 U	AD JS			
Current Mailing Address:			New Mailing Address:		
703 ROBE	RTS MILL RC FN 37343 - U	AD JS			
FEI Number	: 59-3219861	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
2360 SE 1	.L, JUDY E. 73RD COURT PRINGS, FL 3				
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RF.				
Electronic Signature of Registered Agent			ent	Date	
		o satisfy its Intangible Tax filing red g Trust Fund Contribution ().	quirement and elects to do so (X).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTM (PARKER, JEA 703 ROBERTS HIXSON, TN 3	MILL RD	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VD (PARKER, JAM 703 ROBERTS HIXSON, TN 3	MILL RD	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name:	S (CANTRELL. JU) Delete JDY F	Title: (Name:) Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JEAN PARKER PTM 04/14/2002