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May 06 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000004993 (8)**

1. Corporation Name

**PARKER FINANCING & LEASING INC.**

Principal Place of Business

**2691 EAST OAKLAND PARK BLVD.  
FT. LAUDERDALE FL 33306**

Mailing Address

**2691 EAST OAKLAND PARK BLVD.  
FT. LAUDERDALE FL 33306-1661**



3. Date Incorporated or Qualified  
**01/17/1995**

3a. Date of Last Report  
**11/13/1996**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

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30

9. Name and Address of Current Registered Agent

**WILKES, JOHN P  
150 NORTH FEDERAL HIGHWAY  
SUITE 200  
FT. LAUDERDALE FL**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE  
NAME **PARKER, PAUL**  
STREET ADDRESS **2691 EAST OAKLAND PARK BLVD.**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33306**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME **VICE PRESIDENT**  
2.3 STREET ADDRESS **ROBERT W. PARKER**  
2.4 CITY-ST-ZIP **2691 E. OAKLAND PARK BLVD.  
FT. LAUDERDALE, FL 33306**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition  
3.2 NAME **SECRETARY**  
3.3 STREET ADDRESS **GARY N. PARKER**  
3.4 CITY-ST-ZIP **2691 E. OAKLAND PARK BLVD.  
FT. LAUDERDALE, FL 33306**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME **TREASURER**  
4.3 STREET ADDRESS **GARY N. PARKER**  
4.4 CITY-ST-ZIP **2691 E. OAKLAND PARK BLVD.  
FT. LAUDERDALE, FL 33306**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0261930

CR2E034 (9/96)