

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000095997 (9)

1. Corporation Name

PARKER-BRIDGEWAY, INC.

Principal Place of Business

6296 CORPORATE COURT
SUITE A-101
FORT MYERS FL 33919

Mailing Address

6296 CORPORATE COURT
SUITE A-101
FORT MYERS FL 33919



2. Principal Place of Business

2a. Mailing Address

21 9400 GLADIOLUS DRIVE
Suite, Apt. #, etc.

26 9400 GLADIOLUS DRIVE
Suite, Apt. #, etc.

22 SUITE 250
City & State

27 SUITE 250
City & State

23 FT MYERS FL
Zip Country

28 FT MYERS FL
Zip Country

24 33908 25 USA

29 33908 30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/19/1995

3a. Date of Last Report

4. FEI Number

15-0643249

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

MITCHELL, STEPHEN J
201 N. FRANKLIN STREET
SUITE 2100
TAMPA FL 33602

81 Name

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

83 000001801060
-04/30/96--01061--006

84 City

***200.00

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

TITLE D
NAME PARKER, JACK
STREET ADDRESS 6296 CORPORATE COURT, SUITE A-101
CITY-ST-ZIP FORT MYERS FL 33919

TITLE D
NAME TURKEN, WALKER
STREET ADDRESS 6296 CORPORATE COURT, SUITE A-101
CITY-ST-ZIP FORT MYERS FL 33919

TITLE D
NAME GLICK, ADAM
STREET ADDRESS 6296 CORPORATE COURT, SUITE A-101
CITY-ST-ZIP FORT MYERS FL 33919

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 9400 GLADIOLUS DRIVE, SUITE 250
1.4 CITY-ST-ZIP FT MYERS, FL 33908

2.1 TITLE DP
2.2 NAME
2.3 STREET ADDRESS 9400 GLADIOLUS DRIVE, SUITE 250
2.4 CITY-ST-ZIP FT MYERS, FL 33908

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 9400 GLADIOLUS DRIVE, SUITE 250
3.4 CITY-ST-ZIP FT MYERS, FL 33908

4.1 TITLE
4.2 NAME DAVID KNIZNER
4.3 STREET ADDRESS 9400 GLADIOLUS DRIVE, SUITE 250
4.4 CITY-ST-ZIP FT MYERS, FL 33908

5.1 TITLE ST
5.2 NAME JOHN REISMAN
5.3 STREET ADDRESS 9400 GLADIOLUS DRIVE, SUITE 250
5.4 CITY-ST-ZIP FT MYERS, FL 33908

6.1 TITLE
6.2 NAME SUE DAVIDSON
6.3 STREET ADDRESS 9400 GLADIOLUS DRIVE, SUITE 250
6.4 CITY-ST-ZIP FT MYERS, FL 33908

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

4/24/96

941-481-5040

CR2E034 (12/95)

94-30-96