

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000085760

1. Entity Name
PARVEY DEVELOPMENT CORPORATION

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91069 043 ***158.75

Principal Place of Business

Mailing Address

5900 POPLAR AVE
STE 100
MEMPHIS TN 38119
US

5900 POPLAR AVE
STE 100
MEMPHIS TN 38119
US

2. Principal Place of Business

4267 GRANDVIEW AVENUE

3. Mailing Address

4267 GRANDVIEW AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MEMPHIS, TN

City & State

MEMPHIS, TN

Zip

38117

Country

USA

Zip

38117

Country

USA

4. FEI Number **59-3434467**

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GIBSON, THOMAS S
206 E. 4TH STREET
PORT ST. JOE FL 32456

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
PARVEY, RICHARD
5900 POPLAR AVE STE 100
MEMPHIS TN 38119 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
PARVEY, RICHARD
4267 GRANDVIEW AVENUE
MEMPHIS, TN 38117 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C
PARVEY, LOUIS S
3299 WINDEMERE LANE
MEMPHIS TN 38125 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD E. PARVEY 5-1-01 901-485-4031

Date

Daytime Phone #

CR2E034 (10/00)