## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000011655

Entity Name: G.D. PARKER, INC.

FILED Jul 23, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
891 HARBOR DRIVE KEY BISCAYNE, FL 3314	19			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
891 HARBOR DRIVE KEY BISCAYNE, FL 33149				
FEI Number: 65-0818455	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:	
QUESADA, LYDIA C 396 ALHAMBRA CIR., SUITE 210 CORAL GABLES, FL 33134 US		ADORNÓ & YOSS LLP 2525 PONCE DE LEON	TORRES, OSVALDO F ADORNO & YOSS LLP 2525 PONCE DE LEON BLVD., STE. 400 CORAL GABLES, FL 33134 US	
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: OSVALDO F. TORRES			07/23/2008	
Electronic Signature of Registered Agent Date				
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (  ).				
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: D ()	Delete	Title: PD (	X) Change ( ) Addition	

Name: PARKER, GENARO D Name: PARKER, GENARO D 891 HARBOR DRIVE Address: 891 HARBOR DRIVE Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: KEY BISCAYNE, FL 33149 Title: () Delete Title: **VPS** ( ) Change (X) Addition VANINI, MARCELA Name: Name: Address: Address: 891 HARBOR DRIVE KEY BISCAYNE, FL 33149 City-St-Zip: City-St-Zip: Title: **VPAS** Title: ( ) Delete ( ) Change (X) Addition Name: Name: CASTRO, FEDERICO Address: Address: 891 HARBOR DRIVE City-St-Zip: City-St-Zip: KEY BISCAYNE, FL 33149

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GENARO D. PARKER D 07/23/2008