

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000092800

1. Entity Name

JOHN PARNELL INC. DAYTONA

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90054 025 ***150.00

Principal Place of Business

408 SEA BREEZE BLVD
DAYTONA BEACH FL 32118
US

Mailing Address

408 SEA BREEZE BLVD
DAYTONA BEACH FL 32118
US

2. Principal Place of Business

408 SEA Breeze Blvd.

3. Mailing Address

408 SEA Breeze Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

DayTona Beach, Florida

City & State

DayTona beach, Florida

4. FEI Number

59-3478801

Applied For

Not Applicable

Zip

Country

32118

U.S.A.

Zip

Country

32118

U.S.A.

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

PANZARELLA, JANINE
408 SEA BREEZE BLVD
DAYTONA BEACH FL 32118

Name

JANINE PANZARELLA

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

408 SEA Breeze Blvd.

City

DayTona Beach

FL

Zip Code

32118

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	D	<input type="checkbox"/> Delete
NAME	PANZARELLA, JANINE	
STREET ADDRESS	408 SEA BREEZE BLVD	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Janine Panzarella

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/01

Date

386-252-8819

Daytime Phone #

CR2E034 (10/00)