

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90329 032 ***150.00

DOCUMENT # P97000106116

1. Entity Name
PURPLE PARROT, INC.



Principal Place of Business
**1388 BEACH BLVD
JACKSONVILLE BEACH FL 32550
US**

Mailing Address
**1388 BEACH BLVD
JACKSONVILLE BEACH FL 32550
US**

2. Principal Place of Business

1210 BEACH BLVD.
Suite, Apt. #, etc.

3. Mailing Address

← SAME
Suite, Apt. #, etc.

City & State

JACKSONVILLE BEACH, FL

City & State

← SAME

4. FEI Number

59-3561303

Applied For

Not Applicable

Zip

32250

Country

DUVAL

Zip

← SAME

Country

← SAME

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MILLS, PHILLIP
1388 BEACH BLVD
JACKSONVILLE BEACH FL 32250**

7. Name and Address of New Registered Agent

Name

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

1210 BEACH BLVD.

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **MILLS, PHILLIP**
STREET ADDRESS **1388 BEACH BLVD**
CITY-ST-ZIP **JACKSONVILLE BEACH FL 32250**

TITLE **D** ☐ Delete
NAME **MILLS, SANDRA RICHTER**
STREET ADDRESS **1388 BEACH BLVD**
CITY-ST-ZIP **JACKSONVILLE BEACH FL 32250**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1210 BEACH BLVD**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1210 BEACH BLVD**
CITY-ST-ZIP

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CHARLES PHILLIP MILLS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)