

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90150 037 ***150.00

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

40052510



DOCUMENT # P98000085283 1. Entity Name PARKER - BRITTANY II, INC.			
Principal Place of Business 9400 GLADIOLUS DR., STE. 250 FT. MYERS, FL 33908		Mailing Address 9400 GLADIOLUS DR., STE. 250 FT. MYERS, FL 33908	
2. Principal Place of Business 9001 DANIELS PARKWAY		3. Mailing Address 9001 DANIELS PARKWAY	
Suite, Apt. #, etc. SUITE 200		Suite, Apt. #, etc. SUITE 200	
City & State FORT MYERS, FL		City & State FORT MYERS, FL	
Zip 33912	Country	Zip 33912	Country
4. FEI Number 65-0874119		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ANDRES SERVICE CORPORATION OF FLORIDA 201 N. FRANKLIN STREET SUITE 2100 TAMPA, FL 33602		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right; margin-right: 50px;"> FL Zip Code </div>	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKER, JACK 9400 GLADIOLUS DR., STE. 250 FT. MYERS, FL 33908	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9001 DANIELS PARKWAY SUITE 200 FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP REISMAN, JOHN 9400 GLADIOLUS DR., STE. 250 FT. MYERS, FL 33908	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9001 DANIELS PARKWAY SUITE 200 FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST KNIZNER, DAVID 9400 GRADUOCUS AVE SUITE 250 FT MYERS, FL 39908	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9001 DANIELS PARKWAY SUITE 200 FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLICK, ADAM 9400 GLADIOLUS DR STE 250 FORT MYERS, FL 33908	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9001 DANIELS PARKWAY SUITE 200 FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 the 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:		DAVID KNIZNER	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 4/8/05	Daytime Phone # 239.481.5000