

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1852

APPLICATION FOR  
2000-UBR



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

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DOCUMENT # P99000023468

1. Corporation Name

PARKER BROTHER'S TRADING COMPANY, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten mark]*



Principal Place of Business Mailing Address  
1772 PARKER ROAD 1772 PARKER ROAD  
YULEE FL 32097 YULEE FL 32097

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

07/26/00 90008033 \$550.00

2. New Principal Office Address, If Applicable  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. New Mailing Office Address, If Applicable  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. Date Incorporated or Qualified To Do Business in Florida  
3-24-99 03/09/1999

5. FEI Number  
59-3563471

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
V.P.	GORDAN D. PARKER	1772 PARKER RD. PO Box 761	YULEE, FL 32041
TREA.	JULIEN H. PARKER III	1925 LOOK RD.	FERNANDINA BEACH, FL 32034
SECT.	THELMA LEE PARKER DAVIS	1772 PARKER RD	YULEE, FL 32041
PRES.	JULIEN H. PARKER, JR.	1772 PARKER RD.	YULEE, FL 32041

8. Name and Address of Current Registered Agent  
PARKER, GORDON O  
1772 PARKER ROAD  
YULEE FL 32097

9. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, Etc.  
City State Zip Code  
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent \_\_\_\_\_ **SIGNATURE REQUIRED** \_\_\_\_\_ Date \_\_\_\_\_  
REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(l), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *[Handwritten Signature]* **SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 11-27-00 (901) 225-5689  
Daytime Phone #

CR2E040 (8/00)

PARKER BROTHER'S TRADING COMPANY, INC.  
PO Box 26991  
Jacksonville, Florida 32226

November 27, 2000

2882

Division Of Corporations  
P.O. Box 6327  
Tallahassee FL 32314-6327

To Whom It May Concern:

Enclosed is form filled out with our Corporation Officers and/or Directors, with their street address of each Officer.

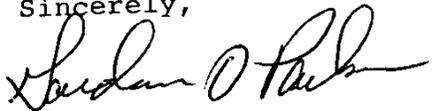
We failed to send their names when we filed our report July 17, 2000, when we sent our Corporation fees. Our check was sent July 17, 2000, (please see attached copy) and cashed by your office as you can see.

We never heard anything from your office until now. Please waive the fine you say we owe.

If this is not acceptable to your office please advise.

Thank you for your attention to this matter.

Sincerely,



Gordon O Parker

Attachments:

/pw

