## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000030759

Entity Name: PARROT EYES, INC.

FILED Mar 22, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1174 PONTE VEDRA BLVD. 14750 BEACH BLVD. PONTE VEDRA BEACH, FL 32082

34

JACKSONVILLE, FL 32250

**Current Mailing Address: New Mailing Address:** 

1174 PONTE VEDRA BLVD. 14750 BEACH BLVD

PONTE VEDRA BEACH, FL 32082

JACKSONVILLE, FL 32250

FEI Number: 59-3571286 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KELLY, BARBARA E KELLY, BARBARA E 1174 PONTE VEDRA BLVD. 14750 BEACH BLVD.

PONTE VEDRA BEACH, FL 32082 US JACKSONVILLE, FL 32250 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: 03/22/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition KELLY, BARBARA E KELLY, BARBARA E Name: Name: 1174 PONTE VEDRA BLVD. 14750 BEACH BLVD #34 Address: Address:

City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: JACKSONVILLE, FL 32250

Title: Title: (X) Change ( ) Addition () Delete JENNINGS, CLYDE T JENNINGS, CLYDE T Name: Name: 1174 PONTE VEDRA BLVD. Address: 14750 BEACH BLVD #34 Address: PONTE VEDRA BEACH, FL 32082 JACKSONVILLE, FL 32250 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BARBARA E. KELLY D 03/22/2004