

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 636624

**Entity Name:** PARRISH PULPWOOD, INC.

**Current Principal Place of Business:**

462 CR 217  
MAXVILLE, FL 32234

**Current Mailing Address:**

462 CR 217  
MAXVILLE, FL 32234 US

**FEI Number:** 59-1934009

**Certificate of Status Desired:** No

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

PARRISH, DAVID J  
462 CR 217  
MAXVILLE, FL 32234 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

|                 |                  |                 |                |
|-----------------|------------------|-----------------|----------------|
| Title           | P                | Title           | S              |
| Name            | PARRISH, DAVID J | Name            | PARRISH, ANGIE |
| Address         | 462 CR 217       | Address         | 462 CR 217     |
| City-State-Zip: | MAXVILLE FL      | City-State-Zip: | MAXVILLE FL    |

*I hereby 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 all other like empowered.*

**SIGNATURE:** ANGIE PARRISH

**SECRETARY**

**04/23/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date