

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H89605

Entity Name: PARKHILL, INC.

**Current Principal Place of Business:**

10101 BURNT STORE RD #300  
PUNTA GORDA, FL 33950

**Current Mailing Address:**

C/O PALMER PROPERTY MANAGEMENT  
6210 SCOTT STREET, UNIT 214  
PUNTA GORDA, FL 33950 US

FEI Number: 59-2642868

Certificate of Status Desired: No

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

PALMER PROPERTY MANAGEMENT  
6210 SCOTT STREET, UNIT 214  
PUNTA GORDA, FL 33950 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 DIRECTOR  
Name LARSON, LARRY  
Address C/O PALMER PROPERTY  
MANAGEMENT  
6210 SCOTT STREET, UNIT 214  
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR, TREASURER, VP  
Name RICHARDSON, JUDY  
Address C/O PALMER PROPERTY  
MANAGEMENT  
6210 SCOTT STREET, UNIT 214  
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR, ASST. SECRETARY  
Name PARENT, ERNIE  
Address C/O PALMER PROPERTY  
MANAGEMENT  
6210 SCOTT STREET, UNIT 214  
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR, SECRETARY  
Name MILLER, STEVE  
Address C/O PALMER PROPERTY  
MANAGEMENT  
6210 SCOTT STREET, UNIT 214  
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR, PRESIDENT  
Name STREMMING, JOHN  
Address C/O PALMER PROPERTY  
MANAGEMENT  
6210 SCOTT STREET, UNIT 214  
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR  
Name SHIREY, CHARLES  
Address C/O PALMER PROPERTY  
MANAGEMENT  
6210 SCOTT STREET, UNIT 214  
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR  
Name HOY, DEAN  
Address C/O PALMER PROPERTY  
MANAGEMENT  
6210 SCOTT STREET, UNIT 214  
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR, ASST. TREASURER  
Name WOODS, CLAUDE  
Address C/O PALMER PROPERTY  
MANAGEMENT  
6210 SCOTT STREET, UNIT 214  
City-State-Zip: PUNTA GORDA FL 33950

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*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: JOHN STREMMING

PRESIDENT

03/28/2021

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           O'NEILL, BOB  
Address        C/O PALMER PROPERTY MANAGEMENT  
                  6210 SCOTT STREET, UNIT 214  
City-State-Zip: PUNTA GORDA FL 33950