FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # 159376 (3)

1. Corporate Name

WILLIAM C. AND GENE C. WHITEAKER, INC.

Principal Place of Business: 18525 S.W. 293 TERRACE, HOMESTEAD FL 33030

Mailing Address: 18525 S.W. 293 TERRACE, HOMESTEAD FL 33030

3. Date Incorporated or Qualified: 10/21/1949

3a. Date of Last Report: 05/01/1994

4. FEI Number: 59-6069153 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22 / 27

City & State — 23 / 28

Zip — 24 · Country — 25 · Zip — 29 · Country — 30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DUNNIGAN, JENNIFER A.
18525 SW 293 TERRACE
HOMESTEAD FL 33030

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1-1 TITLE	☐ Change ☐ Addition
NAME	WEBSTER, GRAHAM.	1-2 NAME	
STREET ADDRESS	19800 SW 180 AVE #255	1-3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1-4 CITY-ST-ZIP	
TITLE	VP	2-1 TITLE	VP ☑ Change ☐ Addition
NAME	WEBSTER, GLENN.	2-2 NAME	Webster, Glenn
STREET ADDRESS	445 NW 13 ST.	2-3 STREET ADDRESS	16098 Bailey Hill Rd
CITY-ST-ZIP	HOMESTEAD FL	2-4 CITY-ST-ZIP	Brooksville, Fl. 34614
TITLE	S	3-1 TITLE	☐ Change ☐ Addition
NAME	DUNNIGAN, JENNIFER.	3-2 NAME	
STREET ADDRESS	18525 S.W. 293 TERR.	3-3 STREET ADDRESS	
CITY-ST-ZIP	HOMESTEAD FL	3-4 CITY-ST-ZIP	
TITLE	T	4-1 TITLE	T ☑ Change ☐ Addition
NAME	WEBSTER, GREGG	4-2 NAME	Webster, Gregg
STREET ADDRESS	122 NE 18 ST.	4-3 STREET ADDRESS	702 County Rd 467
CITY-ST-ZIP	HOMESTEAD FL	4-4 CITY-ST-ZIP	Lake Panasoffkee, Fl. 33538
TITLE		5-1 TITLE	☐ Change ☐ Addition
NAME		5-2 NAME	
STREET ADDRESS		5-3 STREET ADDRESS	
CITY-ST-ZIP		5-4 CITY-ST-ZIP	
TITLE		6-1 TITLE	☐ Change ☐ Addition
NAME		6-2 NAME	
STREET ADDRESS		6-3 STREET ADDRESS	
CITY-ST-ZIP		6-4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jennifer A. Dunnigan 4/30/95 (305) 248-6894

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jennifer A. Dunnigan

0000266 CP