2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000079325

Signature, typed or printed name of registered agent and title if applicable,

OFFICERS AND DIRECTORS

10 CORPORATION OF PENSACOLA

MILTON FL 32583

9. This corporation is eligible to satisfy its Intangible

WHIGHAM, JAMES E.

5793 PEBBLE RIDGE DR

Tax filing requirement and elects to do so.

MILTON FL

(See criteria on back)

SIGNATURE

11.

TITLE

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE NAME

CITY-ST-ZIP

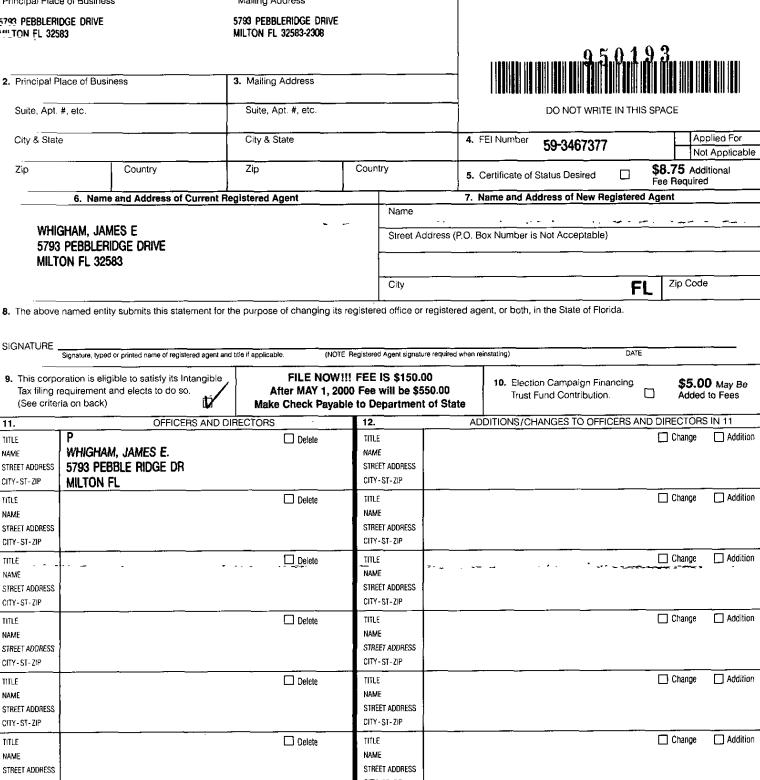
CITY-ST-ZIP

CITY-ST-ZIP

	Mailing Address 5793 PEBBLERIDGE DRIVE MILTON FL 32583-2308 3. Mailing Address Suite, Apt. #, etc.		Principal Place of Business 793 PEBBLERIDGE DRIVE "TON FL 32583 2. Principal Place of Business Suite, Apt. #, etc.	
II				
4. FEIN	City & State		City & State	
5. Cert	Country	Zip	Country	Zip
7. Nam	rent Registered Agent Name		6. Name and Address of Curr	

FILED May 03, 2000 8:00 am Secretary of State

05-03-2000 90098 008 ***150.00



13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if chapter or on an attachment with an address with all other like empowered. changed, or on an attachment will

City

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

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12.

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

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TITLE

SIGNATURE: