2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State
02-11-2002 90139 025 ***150.00

DOCUMENT # P98000082756

1. Entity Name
L.B. WHITTAKER, INC.

Principal Place of Business	Mailing Address
325 DANE LANE LONGWOOD FL 32750	325 DANE LANE LONGWOOD FL 32750

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2266 Clark St.	2266 Clark St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Apopka, FL	Apopka, FL
Zip 32703 Country Orange	Zip 32703 Country Orange

4. FEI Number 59-3532819 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WHITTAKER, LINDSAY B
325 DANE LANE
LONGWOOD FL 32750

7. Name and Address of New Registered Agent

Name: Lindsay B Whittaker
Street Address (P.O. Box Number is Not Acceptable): 2266 Clark St.
City: Apopka, FL **FL** Zip Code: 32703

8. 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: Lindsay B. Whittaker President DATE: 1/23/02
(Print name of director or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ President WHITTAKER, LINDSAY B ~~1780 VIA PALERMO~~ ~~LONGWOOD FL 32789~~	☐ Delete	Vice President Ramey, Royce L 3101 TCU Blvd. Orlando, FL 32817	☐ Change ☒ Addition
		☐ Delete	President Whittaker, Lindsay B 374 Henkel Cir. Winter Park, FL 32789	☒ Change ☐ Addition
		☐ Delete	Vice President Jeffrey Meyer 3226 Crestwood Forest Dr. Deltona, FL 32725	☐ Change ☒ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 1/23/01 (321) 396-0001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/01)