



# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

04-03-2006 90353 040 \*\*\*150.00

<b>DOCUMENT # 152379</b> 1. Entity Name <b>WHITMIRE LEASING CORPORATION</b>					
Principal Place of Business <b>135 PROFESSIONAL DR. SUITE 104 PONTE VEDRA BEACH, FL 32082 US</b>			Mailing Address <b>135 PROFESSIONAL DR. SUITE 104 PONTE VEDRA BEACH, FL 32082 US</b>		
2. Principal Place of Business <b>2520 Isabella Blvd</b>		3. Mailing Address <b>2520 Isabella Blvd</b>			
Suite, Apt. #, etc. <b>#10</b>		Suite, Apt. #, etc. <b>#10</b>			
City & State <b>Jacksonville Beach, FL</b>		City & State <b>Jacksonville Beach, FL</b>			
Zip <b>32250</b> Country		Zip <b>32250</b> Country		4. FEI Number <b>59-0622280</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b>  <b>WHITMIRE, G. W. 4579 ORTEGA BLVD. JACKSONVILLE, FL 32210</b>			<b>7. Name and Address of New Registered Agent</b> Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City <b>FL</b> Zip Code _____		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>PETERSEN, J.W.</b> <b>4620 ALGONQUIN</b> <b>JACKSONVILLE, FL</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>WHITMIRE, G W</b> <b>4909 ARAPAHOE</b> <b>JACKSONVILLE, FL</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VDP</b> <b>WHITMIRE JR, G W</b> <b>135 PROFESSIONAL DR., STE 104</b> <b>PONTE VEDRA BEACH, FL 32082</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>2520 Isabella Blvd, #10</b> <b>Jacksonville Beach, FL 32250</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD</b> <b>ROBISON, E.W.</b> <b>4850 ORTEGA BLVD.</b> <b>JACKSONVILLE, FL</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date <b>03.30.06</b> Daytime Phone # <b>904.270.2004</b>		