

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**Apr 08 1997 8:00am  
Secretary of State**

PROFIT CORPORATION  
ANNUAL REPORT  
**1997**



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

**DOCUMENT # 231769**

**(1)**

1. Corporation Name  
**GEO. WHITE & ASSOCIATES, INC.**



Principal Place of Business

Mailing Address

**% GEORGE E WHITE, JR.  
3800 HAYMAN LANE  
WALNUT HILL FL 32568**

**% GEORGE E WHITE, JR.  
3800 HAYMAN LANE  
WALNUT HILL FL 32568-2152**

3. Date Incorporated or Qualified

**01/04/1960**

3a. Date of Last Report

**03/11/1996**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

**59-0897664**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Election Campaign Financing

**\$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes  No

9. Name and Address of Current Registered Agent

**WHITE, GEORGE E., JR.  
3800 HAYMAN LANE  
WALNUT HILL FL 32568**

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

(Signature of current principal place of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>PST</b>	<input type="checkbox"/> DELETE
NAME	<b>WHITE, GEORGE E., JR.</b>	
STREET ADDRESS	<b>3800 HAYMAN LANE</b>	
CITY-ST-ZIP	<b>WALNUT HILL FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>WHITE, GEORGE E., JR.</b>	
STREET ADDRESS	<b>3800 HAYMAN LANE</b>	
CITY-ST-ZIP	<b>WALNUT HILL FL</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> DELETE
NAME	<b>WHITE, CYNTHIA L.</b>	
STREET ADDRESS	<b>3800 HAYMAN LANE</b>	
CITY-ST-ZIP	<b>WALNUT HILL FL</b>	
TITLE	<b>STVP</b>	<input type="checkbox"/> DELETE
NAME	<b>GOODMAN, GEORGE ANN</b>	
STREET ADDRESS	<b>3811 HAYMAN LANE</b>	
CITY-ST-ZIP	<b>WALNUT HILL FL</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> DELETE
NAME	<b>GOODMAN, RAYMOND G.</b>	
STREET ADDRESS	<b>3811 HAYMAN LANE</b>	
CITY-ST-ZIP	<b>WALNUT HILL FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 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; if 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: *George Ann Goodman* GEORGE ANN GOODMAN 3/30/97 (904)327-41**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)