

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

FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 373431 (6)
1. Corporation Name
E.H. WHITSON CO., INC.



Principal Place of Business
423 SOUTH 21ST AVENUE
HOLLYWOOD FL 33020

Mailing Address
423 SOUTH 21ST AVENUE
HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/30/1970

2. Principal Place of Business
21 2015 N. 37 AVENUE
Suite, Apt. #, etc.
22 City & State
23 HOLLYWOOD FL
24 Zip 33021
25 Country BROWARD

2a. Mailing Address
26 2015 N. 37 AVENUE
Suite, Apt. #, etc.
27 City & State
28 HOLLYWOOD FL
29 Zip 33021
30 Country BROWARD

4. FEI Number
59-1308997

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. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WHITSON, WILLIAM
423 S 21 AVE
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name
WHITSON, WILLIAM

82 Street Address (P.O. Box Number is Not Acceptable)
2015 N. 37 AVENUE

83

84 City HOLLYWOOD FL 85 Zip Code 33021

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

(NOTE: Registered Agent signature required when reinstating)

DATE 4/21/98

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | DELETE |
|-------|------------------|----------------|---------------------|-------------------------------------|
| PD | WHITSON, WILLIAM | 423 S 21ST AVE | HOLLYWOOD, FL 00000 | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY-ST-ZIP | Change | Addition |
|-----------|------------------|--------------------|---------------------|-------------------------------------|--------------------------|
| PD | WHITSON, WILLIAM | 2015 N. 37 AVENUE | HOLLYWOOD, FL 33021 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
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| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

14. 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 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 *William Whitson* 4/21/98

CR2E034 (10/97)