## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 11, 2005 08:00 AM

DOCUMENT # 449792  1. Entity Name WHITEHURST BUILDERS, INC.				Secretary of State
Principal Place of Business  5850 MACY AVE  JACKSONVILLE, FL 32211  Mailing Address  5850 MACY AVE  JACKSONVILLE, FL 32211  JACKSONVILLE, FL 32211				
DO NOT WRITE IN THIS SPACE		01262005 No Chg-P CR2E034 (10/03)  4. FEI Number		
6. Name and Address of Current Regis	stered Agent			
WHITEHURST, EARLE E 5850 MACY AVE JACKSONVILLE, FL 32211				NOT WRITE THIS SPACE
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				
Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registere	Agent signature required	when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		00 May Be d to Fees	
10. OFFICERS AND DIRECT PD NAME WHITEHURST, EARLE E. STREET ADDRESS 7311 TRAILS END CITY-ST-ZP JACKSONVILLE, FL	CTORS			U00000225582 02/11/05-80044-016 150.00
NAME WHITEHURST, BEVERLY B. STREET ADDRESS 7311 TRAILS END CITY-ST-ZIP JACKSONVILLE, FL				02:11:03-00044-D10 130708 .
ITLE D  MAME WHITEHURST, TIMOTHY  STREET ADDRESS GITY-ST-ZIP JACKSONVILLE, FL 32211			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			ÎN "	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				, .
ITILE NAME STREET ADDRESS CITY-ST-ZIP				i) Floring Statutes I further partifu that the information

Interest centry treat the information supplied with this titing 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Earle Whitehart SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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