

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90079 038 ***150.00

DOCUMENT # 518284

1. Entity Name

WHITAKER PLUMBING OF BOCA RATON, INC.



Principal Place of Business

1555 NW 1ST CT.
BOCA RATON FL 33432

Mailing Address

1555 NW 1ST CT.
BOCA RATON FL 33432

852 NW 1st Ave

852 NW 1st Ave

2. Principal Place of Business

3. Mailing Address

Supp. Apt. #, etc.
B24 5

Supp. Apt. #, etc.
B24 5

City & State

City & State

Boca Raton FL

Boca Raton FL

Zip

Country

Zip

Country

33432

P.B.

33432

P.B.

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RHOADS, CHERYL
965 S.W. 3RD AVENUE
POMPANO BEACH FL 33060

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME WHITAKER, GRADY.
STREET ADDRESS 428 NW 35TH ST
CITY-ST-ZIP BOCA RATON, FL 00000

TITLE D ☐ Delete
NAME WHITAKER, VIRGINIA
STREET ADDRESS 428 NW 35TH ST
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Brady Whitaker ☒ Change ☐ Addition
NAME 852 NW 1st Ave B24 5
STREET ADDRESS Boca Raton, FL 33432
CITY-ST-ZIP

TITLE Virginia Whitaker ☒ Change ☐ Addition
NAME 852 NW 1st Ave B24 5
STREET ADDRESS Boca Raton FL 33432
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Virginia Whitaker Virginia Whitaker 1-23-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 561392-8403