


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 11, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 607621</b> 1. Entity Name WHITE HOSKINS COOK AGENCY, INC.	
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Principal Place of Business 6821 CENTRAL AVE. ST. PETERSBURG, FL 33710	Mailing Address 6821 CENTRAL AVE. ST. PETERSBURG, FL 33710
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07082008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-1871863	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

TAUFF, BETTY  
1740 51ST ST N  
ST PETERSBURG, FL 33710

**DO NOT WRITE IN 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TAUFF, BETTY 1740 51ST STREET NORTH ST PETERSBURG, FL 33710
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TAUFF, BETTY 1740 51ST ST N ST PETE, FL 33710
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U00000954209  
07/11/08-80004-014 158.75

**DO NOT WRITE IN THIS SPACE**

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.

**SIGNATURE:**

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/8/08

Date

1273814000

Daytime Phone #