

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLOIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **669876** (5)

1. Corporation Name  
**WHIDDEN DEVELOPMENT, INC.**



Principal Place of Business: **2384 HARBORVIEW RD CHARLOTTE HARBOR FL 33980-2115 US**  
Mailing Address: **P.O. BOX 5064 EMERALD ISLE NC 28594 US**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>05/12/1980</b>	3a. Date of Last Report <b>02/21/1995</b>
21. Subst. Apt. #, etc.	22. City & State	26. Subst. Apt. #, etc.	27. City & State	4. FEI Number <b>59-2031573</b>	Applied For Not Applicable
23. Zip	25. Country	28. Zip	29. Country	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
24. Zip	25. Country	29. Zip	30. Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**WHIDDEN, JAMES E., JR.  
23484 HARBORVIEW ROAD  
CHARLOTTE HARBOR FL 33980**

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City	85. Zip Code
			<b>FL</b>	

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to 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: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	<b>P WHIDDEN JR, JAMES E</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>23484 E AHRBORVIEW DR. CHARLOTTE HRBR, FL 00000</b>	1.2 NAME	
CITY-STATE-ZIP	<b>VS WHIDDEN, JANICE</b>	1.3 STREET ADDRESS	
TITLE	<b>23484 HARBORVIEW RD. CHARLOTTE HARBOR FL</b>	1.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>T WHIDDEN, DANNY</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>605 SWANEE RD. PORT CHARLOTTE FL</b>	2.2 NAME	
CITY-STATE-ZIP		2.3 STREET ADDRESS	
TITLE		2.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.1 NAME	
STREET ADDRESS		3.2 STREET ADDRESS	
CITY-STATE-ZIP		3.3 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 deleted) or on an attachment with an address.

SIGNATURE:

*James E Whidden Jr*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**JAMES E WHIDDEN JR**

2-14-96

919-2474746

CR2E034 (12/95)