

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

FILED
May 05 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 # 681043 (6)

1. Corporation Name
JON WHITE INC.

Principal Place of Business

ROUTE 1 BOX 226
C/O JOH WHITE
ALACHUA FL 32615

Mailing Address

16105 MARTIN LUTHER KING BLVD
ALACHUA FL 32615-5253
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 16105 Martin Luther King Blvd		21 16105 Martin Luther King Blvd		08/05/1980	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2023392	
City & State		City & State		5. Certificate of Status Desired	
23 Alachua Fla.		23 Alachua Fla.		X \$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing	
24 32615		29 32615		Trust Fund Contribution	
Country		Country		7. This corporation owes or has paid the current year Intangible	
25 Alachua		30 Alachua		Personal Property Tax due June 30.	
26		31		Yes No	

9. Name and Address of Current Registered Agent

WHITE, JON
ROUTE 1 BOX 16105
ALACHUA FL 32615

10. Name and Address of New Registered Agent

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

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

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	Change Addition
NAME	WHITE, JON	1.2 NAME	
STREET ADDRESS	RT 1 BOX 226	1.3 STREET ADDRESS	16105 Martin Luther King Blvd
CITY-ST-ZIP	ALACHUA FL 32615	1.4 CITY-ST-ZIP	
TITLE	O	2.1 TITLE	Change Addition
NAME	WHITE, JON	2.2 NAME	
STREET ADDRESS	RT 1 BOX 226	2.3 STREET ADDRESS	16105 Martin Luther King Blvd
CITY-ST-ZIP	ALACHUA FL 32615	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	Change Addition
NAME	WHITE, JONNY W. JR.	3.2 NAME	
STREET ADDRESS	RT 1 BOX 226	3.3 STREET ADDRESS	16105 Martin Luther King Blvd
CITY-ST-ZIP	ALACHUA FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:

[Signature]

Jon White 4-25-98 462-2556

CR2E034 (10/97)