

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 JAN 17 PM 4:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F00685

(0)

1. Corporation Name

WHITAKER DOZER, INC.

Principal Place of Business

**2200 N.W. 83 AVENUE
PEMBROKE PINES FL 33024**

Mailing Address

**2200 N.W. 83 AVENUE
PEMBROKE PINES FL 33024**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
10/07/1980

3a. Date of Last Report
06/17/1994

4. FEI Number
59-2034681

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WHITAKER, BOYCE
2200 N.W. 83RD AVENUE
PEMBROKE PINES FL 33024**

81 Name

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

83

84 City

FL

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

PD
WHITAKER, BOYCE
2200 N.W. 83RD AVE
PEMBROKE PINES FL

1.1 TITLE ☐ Change ☐ Addition

SD
WHITAKER, JEANETTE
2200 N.W. 83RD AVE
PEMBROKE PINES FL

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

SD
WHITAKER, JEANETTE
2200 N.W. 83RD AVE
PEMBROKE PINES FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

SD
WHITAKER, JEANETTE
2200 N.W. 83RD AVE
PEMBROKE PINES FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

SD
WHITAKER, JEANETTE
2200 N.W. 83RD AVE
PEMBROKE PINES FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

SD
WHITAKER, JEANETTE
2200 N.W. 83RD AVE
PEMBROKE PINES FL

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

SD
WHITAKER, JEANETTE
2200 N.W. 83RD AVE
PEMBROKE PINES FL

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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 110.07(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 changed, or on an attachment with an address.

SIGNATURE:

Jeanette Whitaker **Jeanette Whitaker**

1-10-95

(305) 432-5716

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #