


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 15, 2004 8:00 am**  
**Secretary of State**

07-15-2004 90039 001 \*\*\*150.00  
07-15-2004 90039 002 \*\*\*\*\*8.75

<b>DOCUMENT # F02000003721</b>	
1. Entity Name <b>ALASKAN ASSETS, INC.</b>	

Principal Place of Business <b>33 NORTH FLETCHER AVE. FERNANDINA BEACH, FL 32034</b>	Mailing Address <b>1126 NORTH FLETCHER AVE. FERNANDINA BEACH, FL 32034</b>
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**66429985**



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

07082004 Chg-P CR2E034 (10/03)

4. FEI Number <b>04-3676193</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
6. Name and Address of Current Registered Agent <b>WHITLEY, HAL C. 33 NORTH FLETCHER AVE. FERNANDINA BEACH, FL 32034</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP WHITLEY, HAL C 1126 NORTH FLETCHER AVE. FERNANDINA BEACH, FL 32034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BROOKBANK, PATRICIA A 1126 NORTH FLETCHER AVE. FERNANDINA BEACH, FL 32034 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Patricia A. Whitley 1126 North Fletcher Ave. Fernandina Beach, FL 32034 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 liquidator; and that I 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:** Hal C. Whitley **7-12-04** **904 753-3580**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

*Attachment*

66429985  
#F02000003721

**Alaskan Assets, Inc.  
1126 North Fletcher Avenue  
Fernandina Beach, Florida 32034**

Katrina Sutphin  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302

Re: Letter # 704A00043786

Pursuant to your request, I am sending you the Annual Report Form filled out that you recently sent me. I am also sending a photocopy of the annual report I sent on July 6. I downloaded this Annual Report Form that I sent on July 6 from the state website. I called the help number and was told that this downloaded annual report form was all I needed to send in along with \$150.00 and that there was no late fee.

**Please let this letter serve as a request for a waiver of any late fees due to non-receipt of the original/second notice annual report.**

I attempted to call the phone number you provided today to verify this process today. After thirty minutes of holding on long distance, I gave up. I suggest that at the very least that citizens be provided a toll free number and that more staff is available to avoid these long and unanswered phone calls.

I am enclosing both the original check #1263 for \$150.00 and check # 1265 in the amount of \$8.75 for a **Certificate of Status to be mailed to me.**

Respectfully,



Hal C. Whitley, President  
Alaskan Assets, Inc.

66429985

Attachment

www.sunbiz.org

## Division of Corporations

## Annual Report

Page 2

Document Number

F02000003721

Business Entity Name

ALASKAN ASSETS, INC.

mailed on  
7-6-04  
\$150.00  
J# 1263

Election Campaign Financing Trust Fund Contribution Yes No

## Officer/Director Name And Address

Title Pres  
Name (Last, First, Middle, Title) WHITLEY HAL C  
-or- Entity Name  
Street Address 1126 NORTH FLETCHER AVE.  
City, State FERNANDINA BEACH FL  
Zip Code & Country 32034

Title S  
Name (Last, First, Middle, Title) Whitley PATRICIA A  
-or- Entity Name  
Street Address 1126 NORTH FLETCHER AVE.  
City, State FERNANDINA BEACH FL  
Zip Code & Country 32034

Title  
Name (Last, First, Middle, Title)  
-or- Entity Name  
Street Address  
City, State  
Zip Code & Country

Title  
Name (Last, First, Middle, Title)  
-or- Entity Name  
Street Address