

FILED  
May 15, 2002 8:00 am  
Secretary of State

05-15-2002 90102 044 \*\*\*150.00

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F32754

1. Entity Name  
Whitmore Paving, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
PO Box 17976  
Suite, Apt. #, etc.

3. Mailing Address  
Same  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
West Palm Beach, FL

City & State

4. FEI Number  
65-0050357

Applied For  
Not Applicable

Zip  
33416

Country  
USA

Zip

Country

5. Certificate of Status Desired  \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

**DO NOT WRITE  
IN THIS SPACE**

Name  
Cynthia Fletcher  
Street Address (P.O. Box Number Is Not Acceptable)  
2875 S. Ocean Blvd. #200

City Palm Beach FL 33480

8. This above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(Print Name of Agent if Agent is not a natural person)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
(See criteria on back)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: President  
NAME: Jack Whitmore  
STREET ADDRESS: 3397 Bermuda Road  
CITY-ST-ZIP: Palm Beach Gardens, FL 33410

TITLE: \_\_\_\_\_  
NAME: \_\_\_\_\_  
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption set forth in Section 119.07(3)(b), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jack Whitmore*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02 561793 9238  
DATE (Electronic Filing)

SP200205 (12/01)