


**FILED**  
**Feb 04, 2004 08:00 AM**  
**Secretary of State**

**2004 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

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| <b>DOCUMENT # F32754</b><br><small>1. Entity Name</small><br><b>WHITMORE PAVING, INC.</b>  |  |   |
| <small>Principal Place of Business</small><br>P.O. BOX 17976<br>WEST PALM BEACH, FL 33416  |  | <small>Mailing Address</small><br>P.O. BOX 17976<br>WEST PALM BEACH, FL 33416  |
| <b>DO NOT WRITE IN THIS SPACE</b>  |  | 01122004    No Chg-P    CR2E034 (10/03)  |
| <small>4. FEI Number</small><br><b>65-0050357</b>  |  | <small>Applied For</small><br><input type="checkbox"/> Not Applicable  |
| <small>8. Contribution Surplus Desired</small> <input type="checkbox"/>  |  | <b>\$8.75</b> Additional For Required  |
| <small>6. Name and Address of Current Registered Agent</small><br><br><b>FLETCHER, CYNTHIA</b><br><b>11 NORTH J ST</b><br><b>LAKE WORTH, FL 33460</b>  |  | <b>DO NOT WRITE<br/>         IN THIS SPACE</b>   |
| <small>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. I am certain that said agent has accepted the obligations of a registered agent.</small>  |  |  |
| <small>SIGNATURE</small> _____ <small>DATE</small> _____   |  |  |
| <b>FILE NOW!! FEE IS \$150.00</b><br><b>After May 1, 2004 Fee will be \$550.00</b>   |  | <small>9. Election Campaign Financing<br/>         Trust Fund Contribution</small> <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees |
|  |  | 000000033424<br>02/05/04-80043-021 150.00  |
| <b>TO: OFFICERS AND DIRECTORS</b>  |  |  |
| <small>TITLE</small><br><small>NAME</small><br><small>STREET ADDRESS</small><br><small>CITY-ST-ZIP</small>   | <small>P</small><br><b>WHITMORE, JACK</b><br><b>3397 BERMUDA ROAD</b><br><b>PALM BEACH GARDENS, FL 33410</b> | <b>DO NOT WRITE<br/>         IN THIS SPACE</b>   |
| <small>TITLE</small><br><small>NAME</small><br><small>STREET ADDRESS</small><br><small>CITY-ST-ZIP</small>   |  |  |
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| <small>TITLE</small><br><small>NAME</small><br><small>STREET ADDRESS</small><br><small>CITY-ST-ZIP</small>   |  |  |
| <small>12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(j), Florida Statutes. I further certify that the information included 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 corporation's trustee, shareholder or member; that, except as required by Chapter 007, Florida Statutes, and that my name appears in Block 10 or Block 11 of this report; or am not affiliated with an address with an other state employment.</small> |  |  |
| <b>SIGNATURE:</b> <i>Jack Whitmore</i>   |  | <b>1/12/04</b> <b>65-793-9238</b>  |