

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

FILED  
Feb 25 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F46999** (1)  
1. Corporation Name  
**BILL WHITAKER, CHARTERED**

Principal Place of Business <b>211 NO MAGNOLIA AVE ORLANDO FL 32801 US</b>	Mailing Address <b>2931 LAKE PINELoch BLVD. ATTN: PATTI STAUB ORLANDO FL 32806 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2931 Lake Pineloch Blvd Suite, Apt. #, etc. 22 City & State 23 Orlando, FL Zip 24 32806 Country 25 USA		2a. Mailing Address 26 2931 Lake Pineloch Blvd Suite, Apt. #, etc. 27 City & State 28 Orlando, FL Zip 29 32806 Country 30 USA		3. Date Incorporated or Qualified 10/01/1981	
		4. FEI Number 59-2129326		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent <b>DOROUGH, R. LEE 211 NO MAGNOLIA AVE ORLANDO FL 32801</b>				10. Name and Address of New Registered Agent	
				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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
11 TITLE NAME STREET ADDRESS CITY-ST-ZIP				11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP			
PDD WHITAKER, BILL 211 NO MAGNOLIA AVE ORLANDO FL				2931 Lake Pineloch Blvd. Orlando, FL 32806			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
21 TITLE NAME STREET ADDRESS CITY-ST-ZIP				21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
31 TITLE NAME STREET ADDRESS CITY-ST-ZIP				31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
41 TITLE NAME STREET ADDRESS CITY-ST-ZIP				41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
51 TITLE NAME STREET ADDRESS CITY-ST-ZIP				51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
61 TITLE NAME STREET ADDRESS CITY-ST-ZIP				61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			

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: \_\_\_\_\_

2/13/98

CR2E034 (10/97)