

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91899 006 ***150.00

0394947 AV

DOCUMENT # H45835

1. Entity Name

WHITTAKER TRUCK MAINTENANCE, INC.



Principal Place of Business

% RONALD WHITTAKER

~~359 INDUSTRIAL AVE~~

BOYNTON BEACH FL 33426-3620

Mailing Address

% RONALD WHITTAKER

~~359 INDUSTRIAL AVE~~

BOYNTON BEACH FL 33426-3620

2. Principal Place of Business

422 W INDUSTRIAL

Suite, Apt. #, etc.

3. Mailing Address

422 W INDUSTRIAL AVE

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

BOYNTON BEACH FL

Zip

33426

Country

FLA BEACH

City & State

BOYNTON BEACH FL

Zip

33426

Country

FLA BEACH

4. FEI Number

59-2506070

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WHITTAKER, RONALD

422 W. INDUSTRIAL

BOYNTON BEACH FL 33426

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **WHITTAKER, RONALD**
STREET ADDRESS **~~359 INDUSTRIAL AVE~~**
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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 trustee empowered to 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:

Ronald E. Whittaker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-2003

Date

Daytime Phone #

CR2E034 (10/02)