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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J12167

(9)

WHITFIELD PROPERTIES CORPORATION

FILED

Apr 15 1997 8:00am

Secretary of State

Principal Place of Business		Mailing Address		- I DERLAND BURN TIDUR TSOOM HIBIR BRUIN FORM OIRNY BSOAN ATRIT OIRNY OIRNY OIRNY OIRNY OIRNY ATRIT	
3629 WEBBER ST., BL SARASOTA FL 34232		3629 WEBBER ST., BL SARASOTA FL 34232			
				3. Date Incorporated or Qualified 04/30/1986	3a. Date of Last Report 05/01/1996
·	al Place of Business	2a. Mailing Address	1	4. FEI Number	Applied For
21		26 363/-A	VEBBER ST.	59-2671697	Not Applicable
22	pt #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & S [23]	state	City & State 28 SARASOTA	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
24	25	29 34232	30 SARASOTA		Yes No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Reg	platered Agent
BEHR, THEODORE JON, SR.			81 Name	Behr, Theodore Jon, Sr.	
3629 WEBBER ST., BL SARASOTA FL 34232-1412			82 Street Addre	ress (P.O. Box Number is Not Acceptable)	
			00	3631-A Webber s	C.
			83	Sarasota,	
			84 City		85 Zip Code
11 Porcon	int to the provisions of Sections 607,050	2 and CO7 1509 Florida Statut	on the above period earn	oration of harita this state of the	FL 34232
office c	or registered agent, or both, in the State	of Florida. Such change was a	authorized by the corporate	oration submits this statement for the pl on's board of directors. I hereby accep	t the appointment as registered
	I am familiar with, and accept the obliga-	ations of, Section 607,0505, Fig	orida Statutes.		
SIGNATUR	Signary a typical or pointed name of registered age.	or and title if applicable (NOT	E. Registered Agent signature require	and when reinstation	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
गार्स	DVP	☐ DELETE	1.1 TITLE		Change Addition
NAME:	RUSSO, JOSEPH V. JR.		1.2 NAME		·
STREET ADDRES			1.3 STREET ADDRESS		
CITY-ST-ZIP	NOKOMIS FL		1.4 CITY-ST-ZIP		
10116	D	DELETE	2.1 TITLE		Change Addition
NAME	VAADI, EUGENE J.		2.2 NAME		
STREET ADDRES			2.3 STREET ADDRESS		
CITY - ST - ZIP	SARASOTA FL		2.4 CITY+ST+ZIP		
10176	DP	DELETE	3.1 TITLE		Change Addition
NAME	BEHR, THEODORE JON, SR.		3.2 NAME		
STREET ADDRES			3.3 STREET ADDRESS		
CITY - ST - ZIF	SARASOTA FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STHEET ACHIRES	35		4.3 STREET ADDRESS		
CITY - STORE			4.4 CITY-ST-ZIP		
1011.E		DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRES	SS		5 3 STREET ADDRESS		
Dity-St-74P			5.4 C/TY - ST - Z/P		<u></u>
TILE		☐ DELETE	6.1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRES	35		6.3 STREET AODRESS		

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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