## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 19, 2002 8:00 am Secretary of State DOCUMENT # L65033 1. Entity Name 05-19-2002 90050 012 \*\*\*158.75 WHITAKER ASSOCIATES, INCORPORATED Mailing Address Principal Place of Business % JESSE DONALD WHITAKER C/O JESSE DONALD WHITAKER 440000 P.O. BOX 620579 3462 CURRYVILLE ROAD OVIEDO FL 32762-0579 CHULUOTA FL 32766 2. Principal Place of Business 3. Mailing Address -DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2998437 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WHITAKER, JESSE DONALD Street Address (P.O. Box Number is Not Acceptable) 3448 CURRYVILLE ROAD CHULUOTA FL 32766 Zip Code City FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOWIII FEE IS \$150.00. 9.=This:corporation.is:eligible.to.satisfy.its:Intangible--10.-Election Gampaign Financing \$5:00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (9/01) ☐ Change ■ Addition TIT! F ☐ Delete TITLE NAME WHITAKER, JESSE DONALD NAME STREET ADDRESS STREET ADDRESS 3448 CURRYVILLE ROAD CITY-ST-7IP CITY-ST-ZIP CHULUOTA FL 32766 Change ☐ Addition □ Delete TITLE NAME NAME WHITAKER, TIMOTHY S STREET ADDRESS STREET ADDRESS 3448 CURRYVILLE ROAD CITY-ST-ZIP CITY-ST-ZIP CHULUOTA FL 32766 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME WHITAKER, BRENDA JOYCE STREET ADDRESS STREET ADDRESS 3448 CURRYVILLE ROAD CITY-ST-ZIP CITY-ST-7IP CHULUOTA FL 32766 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME TYRE, KELLY STREET ADDRESS STREET ADDRESS 12318 GINGHAM COURT CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32828 Addition Change ' Détete ---TITLE TITLE " NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if

SIGNATURE: Jak

changed, or on an attachment with an address, with all other like empowered.

JEGGETT DE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-2002

FILED

Daytime Phone # 462 \$4 CRC