FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 14 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L66050 (0)

1. Corporation Name
WHITAKER'S LANDING, INC.

Principal Place of Business	Mailing Address
~~6660 SCHOONER BAY CIRCLE~~	~~6660 SCHOONER BAY CIRCLE~~
~~SARASOTA FL 34231~~	~~SARASOTA FL 34231~~
~~US~~	~~US~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/16/1990
3a. Date of Last Report: 07/21/1994

2. Principal Place of Business	2a. Mailing Address
21 2446 19th St	26 2446 19th Street
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: SARASOTA, FL	28 City & State: SARASOTA, FL
24 Zip: 34234 25 Country: USA	29 Zip: 34234 30 Country: USA

4. FEI Number: 65-0186160 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HORSLEY, ROBERT B.
6660 SCHOONER BAY CIRCLE
SUITE 320
SARASOTA FL 34231

10. Name and Address of New Registered Agent

81 Name: Desrosiers, Wilfred N.
82 Street Address (P.O. Box Number is Not Acceptable): 2446 19th St
83
84 City: Sarasota, FL 85 Zip Code: 34234

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: [signature] 3-14-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	Delete	☒ Change ☐ Addition
NAME	HORSLEY, ROBERT B.	1.2 NAME		
STREET ADDRESS	6660 SCHOONER BAY CIRCLE	1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP		
TITLE	S	2.1 TITLE	Delete	☒ Change ☐ Addition
NAME	HORSLEY, DOROTHY L	2.2 NAME		
STREET ADDRESS	6660 SCHOONER BAY CIRCLE	2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP		
TITLE	T	3.1 TITLE	P/T	☐ Change ☐ Addition
NAME	DESROSIERS, WILFRED N	3.2 NAME		
STREET ADDRESS	2446 19TH ST	3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: [signature] 3/14/95 813-366-2983
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

033437 1 CP