

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000110463

1. Entity Name
R. O. WHISANANT, INC.

FILED

02 JUL 16 PM 3:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
3428 W MINNEHAHA ST
TAMPA FL 33614

Mailing Address
3428 W MINNEHAHA ST
TAMPA FL 33614

2. Principal Place of Business
3428 W. Minnehaha St
Suite, Apt. #, etc.

3. Mailing Address
3428 W. Minnehaha St
Suite, Apt. #, etc.

City & State
Tampa, FL

City & State
Tampa, FL

Zip
33614

Country
Hillsborough

Zip
33614

Country
Hillsborough

4. FEI Number
59-3759404

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
WHISANANT, DEBRA G
3428 W MINNEHAHA ST
TAMPA FL 33614

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHISANANT, RICHARD O 3428 W MINNEHAHA ST TAMPA FL 33614	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WHISANANT, DEBRA G 3428 W MINNEHAHA ST TAMPA FL 33614	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	900006471819-1 -07/17/02--01063--007 ***150.00 ***150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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

SIGNATURE: *Debra Whisanant* 7-8-02 813-871-2529

0089963 AV

CR2E034 (4/02)

Attachment
Doc. # 01000110463

R. O. Whisanant, Inc.
3428 W. Minnehaha St.
Tampa, FL 33614

July 8, 2002

Florida Department of State Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Re: Filing Uniform Business Reporting for year 2202
R. O. Whisanant, Inc.
59-3759404

Dear Katherine Harris,

I have enclosed this letter in hopes that the late filing fee of \$400.00 is waved on the above named corporation.

As a director of R. O. Whisanant, Inc. I usually always take care of all taxes and reporting to state and federal agencies, but due to 2 surgeries and my battle with Fibromyagia over the last couple of months, I was not able to meet the May 2002 deadline. Due to my illness, I was forced to leave my job and my husband was trying to take of his business and me at the same time. The late filing fee is simply not affordable to us. I appreciate your assistance with is matter.

Sincerely,

Debra Whisanant

Debra Whisanant