2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P03000121221



FILED Feb 08, 2007 8:00 am Secretary of State

1. Entity Name WHITAKER CUSTOM CONSTRUCTION, INC.						A I	02-08-2007 90042 050 ***150.00				
Principal Place of Business			ng Address								
34727 VALLEY HILL LANE EUSTIS, FL 32736			34727 VALLEY HILL LANE EUSTIS, FL 32736								
2. Principal Place of Business - No P.O. Box #			3. Mailing Address								
Suite, Apt. #, etc.		Sui	Suite, Apt. #, etc.			01252007	Chg-P	CR2E	034 (12/06)		
City & State		City	City & State			4. FEI Numbe 20-036		•		oplied For ot Applicable	
Zip	Country	Zip		Coun	try		of Status Desired		\$8.75 Ade Fee Require		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
WHITAKER					Name Street Address	s (P.O. Box Numbe	er is Not Acceptable	· -			
34727 VALLEY HILL LANE EUSTIS, FL 32736											
					City			FI	Zip Cod	е	
8. The above the obligati	named entity submits this statemer ions of registered agent.	nt for the purp	oose of changing its	register	ed office or regist	ered agent, or bot	h, in the State of Flo	orida. Lan	familiar with,	and accept	
SIGNATURE_	Signature, typed or printed name of registered a	gent and title if ap	plicable (NOTE	E Registere	d Agent signature requir	red when reinstating)		DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$55	60.00	9. Election Campai Trust Fund Contr	-	~ ~ ~	5.00 May Be ided to Fees					
10.	OFFICERS A	ND DIRECTO)RS	11.		ADDITIONS/	CHANGES TO OFFI	ICERS AN	D DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WHITAKER, GREGG 34727 VALLEY HILL LANE EUSTIS, FL 32736		☐ Defete						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Oelete						☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						☐ Change	☐ Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP			☐ Delete						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete						Change	Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

02-06-07

352 483-2070 Daytime Phone #