

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007 8:00 am
Secretary of State

04-30-2007 90407 002 ***150.00

DOCUMENT # P06000155182

1. Entity Name
JEFF WHITE APPLIANCE SERVICE, INC.



Principal Place of Business
**5803 MULDOON ROAD
PENSACOLA, FL 32562**

Mailing Address
**5803 MULDOON ROAD
PENSACOLA, FL 32562**

66015872



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04132007

Chg-P

CR2E034 (12/06)

4. FEI Number

02-0794046

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PITTMAN, DANIEL E
5803 MULDOON ROAD
PENSACOLA, FL 32562**

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 **DANIEL E Pittman**

(Signature, typed or printed name of registered agent and fee if applicable)

(NOTE: Reg. Agent signature required when completing)

DATE

4-28-07

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **PITTMAN, DANIEL E**
CITY-ST-ZIP **5803 MULDOON ROAD
PENSACOLA, FL 32562**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 receiver or trustee empowered to execute this report as required by Chapter 507, 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.

SIGNATURE:

(Signature, typed or printed name of signing officer or director)

DAN PITTMAN

5-17-07

Date

850-

458-9431

Daytime Phone #