# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Apr 28, 2003 8:00 am**
**Secretary of State**
04-28-2003 91461 016 ***150.00

063091 AT

DOCUMENT # P22788

1. Entity Name
RALPH WHITEHEAD ASSOCIATES, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 4348 SOUTHPOINT BLVD<br>STE 310<br>JACKSONVILLE FL 32216 | PO BOX 35624<br>CHARLOTTE NC 28235-5624<br>US |

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 56-0730953 ☐ Applied For ☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

**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

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2003 Fee will be $550.00**
**Make Check Payable to Florida Department of State**

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 / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>JENKINS, JAMES E<br>1000 W. MOREHEAD, STE. 200<br>CHARLOTTE NC | ☐ Delete | Chairman/V.P.<br>Ronald C. Briggs<br>10800 Midlothian Turnpike<br>Richmond, VA 23235 | ☐ Change | ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>WILLIAMS, RAYMOND E<br>1000 W. MOREHEAD, STE. 200<br>CHARLOTTE N. | ☐ Delete | Asst. Sec., Director<br>Brian D. Dehler<br>1000 West Morehead Street<br>Charlotte, NC 28208 | ☐ Change | ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>MATTHIS, G. STUART II<br>1000 W. MOREHEAD, STE. 200<br>CHARLOTTE NC | ☐ Delete | Asst. Treasurer/ Director<br>Gregory R. Sigmon<br>1000 West Morehead Street<br>Charlotte, NC 28208 | ☐ Change | ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VPD<br>WHITE, WILLIS S III<br>3733 UNIVERSITY BLVD., STE. 305<br>JACKSONVILLE FL | ☒ Delete | Vice Pres./ Director<br>George T. Zimmerman<br>3505 Koger Boulevard<br>Duluth, GA 30096 | ☐ Change | ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VPD<br>BAUGHMAN, ROBERT H<br>1000 W. MOREHEAD, STE. 200<br>CHARLOTTE NC | ☐ Delete | Vice President<br>Jeffrey L. Gagne<br>1000 West Morehead Street<br>Charlotte, NC 28208 | ☐ Change | ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☒ D<br>KELLEY, KENNETH T<br>3733 UNIVERSITY BLVD STE 305<br>JACKSONVILLE FL | ☐ Delete | | ☐ Change | ☐ Addition |

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** SIGNATURE REQUIRED J. Edward Jenkins, President 4/23/03 704/372-1885
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #