


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P94000005223</b> 1. Entity Name <b>WHITE'S PLACE, INC.</b>	
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Principal Place of Business <b>320 GENERAL DOOLITTLE DRIVE JACKSONVILLE, FL 32225</b>	Mailing Address <b>320 GENERAL DOOLITTLE DRIVE JACKSONVILLE, FL 32225</b>
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**DO NOT WRITE IN THIS SPACE**

FILED  
04 AUG 16 AM 10:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



08122004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-3224866</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  <b>TOMKOVICH, MICHAEL D 657 WONDERWOOD DR JACKSONVILLE, FL 32233</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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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

<b>FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TOMKOVICH, MICHAEL 657 WONDERWOOD DR JACKSONVILLE, FL 32233
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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.

<b>SIGNATURE:</b> 	<b>8.12.4</b>	<b>904 739-6946</b>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>

**CAESARS  
GENTLEMEN' S CLUB**

4923 UNIVERSITY BLVD W.  
JACKSONVILLE, FL 32217  
(904)-739-6966

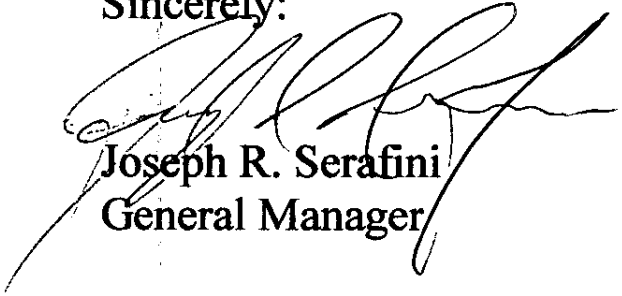
08-12-2004

Dear Shawn:

I am writing in regard to our phone conversation of 8-12-04. Enclosed you will find the annual statement and replacement check for the annual fees for Whites Place. Document # p94000005223. The check written and sent on 2-24-04 has been cancelled.

Please feel free to contact me at 904-739-6966 if you require any additional information.

Sincerely:



Joseph R. Serafini  
General Manager