FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

· PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000027592 (2)

#1 WHITE'S CONSTRUCTION, INC.

FILED Apr 10 1998 8:00am Secretary of State



Principal Place of Business Mailing Address	
3893 SECTION ST. 3893 SECTION ST.	
MIDDLEBURG FL 32068 MIDDLEBURG FL 32068	IN THE COLOR
DO NOT WRITE I	IN THIS SPACE
3. Date Incorporated or Qualified 04/12/1994	
2. Principal Place of Business 2a, Mailing Address 4, FEI Number	Applied For
26 59-3222584	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.	\$8.75 Additional
22 27	Fee Required
City & State City & State 6. Election Campaign Financing	\$5.00 May Be
23 Trust Fund Contribution	Added to Fees
Zip Country Zip Country 8. This corporation owes or has paid	
24 25 29 30 Personal Property Tax due June 3 a Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and New Registered Agent 10. Name a	
	Astered Agent
WINDIA C	
3893 SECTION ST. 82 Street Address (P.O. Box Number is Not Acceptable	6)
MIDDLEBURG FL 32068	

84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the pu	
I affice or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept	t the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	
SIGNATURE Stomsture, typed or printed name of registered agent and tello if applicable (NOTE: Registered Agent signature required when reinstating)	DA1E.
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE PD DELETE 1.5 TITLE	Change Addition
NAME WHITE, MYRON C 12 NAME	
STREET ADDRESS 3893 SECTION ST. 1.3 STREET ADDRESS	
CITY-ST-ZIP MIDDLEBURG FL 32068 1.4 CITY-ST-ZIP	
TITLE DELETE 2.1 TITLE	Change Addition
NAME 22 NAME	
STREET ADDRESS 2.3 STREET ADDRESS	
CITY-ST-ZIP 2. 4 CITY-ST-ZIP	
TITLE DELETE 3.1 TILE	Change Addition
NAME 32 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 3.4. CITY-ST-ZIP	
TITLE DELETE 4.1 TITLE	Change Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-ST-ZIP 4.4 CITY-ST-ZIP	
THILE DELETE 5.1 THE	Change Addition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	
TITLE DELETE 61 TITLE	Change Addition
NAME 62 NAME	į
STREET ADDRESS 6.3 STREET ADDRESS	
City-St-ZiP 64 City-St-ZiP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

11 (A) 100 ONL 2022