

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1996 SEP -6 PM 1:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000019731 (5)

1. Corporation Name

WHITAKER & WHITAKER PROPERTIES, INC.



Principal Place of Business

Mailing Address

123 N. KENTUCKY AVE.
SUITE 207
LAKELAND FL 33801

123 N. KENTUCKY AVE.
SUITE 207
LAKELAND FL 33801

3. Date Incorporated or Qualified

03/08/1995

3a. Date of Last Report

3/08/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24

25

26 P.O. Box 3582

27 Suite, Apt. #, etc

28 City & State

29 Zip Country

30

4. FCI Number

59-3301241

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WHITAKER, JAMES A SR.
123 N. KENTUCKY AVE.
SUITE 207
LAKELAND FL 33801

81 Name

WHITAKER, JAMES A SR.

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

THIS SAME AS ABOVE

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 purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent (if registered agent and not applicable)

Signature of Registered Agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME WHITAKER, JAMES A SR.
STREET ADDRESS 123 N. KENTUCKY AVE., #207
CITY-ST-ZIP LAKELAND FL 33801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

200001952542
-09/20/96--01028--005
****375.00 ****375.00

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

JAMES A. WHITAKER SR.

8/20/96

941/644-1214

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)