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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000022508 (2)

WHITTINGTON & ASSOCIATES, INC.

FILED May 06 1998 8:00am Secretary of State

|--|--|

Principal Place of Business Mailing Address									T TO DITAGE THE SOLET BISTS OF THE CONTROL OF THE C	
618 S.E. 12TH COURT 618 S.E. 12TH COURT										
SUITE 1				-	JITE 1					DO NOT WINTE IN THIS COACE
CAPE CORAL	FL 33990			C	APE CORAL FL 33990					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
2. Principal P	tace of Busine	iss.		20	Mailing Address					03/20/1995 4. FEI Number Applied For
21	acc or booms			26	Withing Place and					65-0566614 Not Applicable
Suite, Apt.	#. etc			Suite, Apt #, etc.						CO 75 Addisonal
22				27						6. Certificate of Status Desired Fee Required
City & State	B			City & State						6. Election Campaign Financing \$5.00 May Be
23				28						Trust Fund Contribution Added to Fees
Zip		Cour	ntry	Zip Count			ountry	y		8. This corporation owes or has paid the current year Intangible
24	25 29					30	30			Personal Property Tax due June 30. 🔲 Yes 🔲 No
			ress of Current	Regist	ered Agent		1	·		10. Name and Address of New Registered Agent
	ITTINGTON,						81	Na	me	
	SE 12TH C						82	Str	eet Addres	ss (P.O. Box Number is Not Acceptable)
ÇAI	PE CORAL F	L 3399	Ю				83	 		
							84	Cit	У	FI 85 Zip Code
11. Pursuant l	to the provisio	ns of Se	ections 607.0502	and 60	7.1508, Florida Statu	les, the	abov	e-nan	ned corpo	ration submits this statement for the purpose of changing its registered
office or re agent. I as	egistered agei m familiar with	nt, or bo , and a	oth, in the State of ecept the obligati	f Floria ons of	la. Such change was , Section 607.0505, Fl	authoriz orida St	ed by atute	y the s	corporatio	ration submits this statement for the purpose of changing its registered in's board of directors. I hereby accept the appointment as registered
SIGNATURE										
	Signature, typed or		me of registured agent					ent sign	alure required	when reinstating) DATE
12. TITLE	PVP	· · · · · · 	OFFICERS AND	DIREC	DELETE	13				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME		TON (SAMUEL L		C beccie		TITLE			Change Addition
STREET ADDRESS			COURT, SUITE				NAME			
CITY-ST-ZIP	CAPE CO		•	•		- 1		T ADORE	:55	
TITLE	ST	TVIL I	L 00000		DELETE		CITY-S TITLE	51-212		☐ Change ☐ Addition
NAME	WHITTING	TON I	HOLLY E				NAME			
STREET ADDRESS			OURT, SUITE	1				T ADORE	:00	·
CITY-ST-ZIP	CAPE CO		-	•				ST-ZIP		•
TITLE					DELETE		TITLE	U1 - E1F	$\neg \dagger \neg$	☐ Change ☐ Addition
NAME							NAME			
STREET ADDRESS								r ADDRE	ss	
CITY-ST-ZIP								\$7 - ZIP		ļ
TITLE					DELETE		TITLE			Change Addition
NAME						4.2	NAME			
STREET ADDRESS								ADDRE	ess	
CITY-ST-ZIP							CITY-S			
TITLE					DELETE	_	TITLE		1	Change Addition
NAME						5.2	NAME			
STREET ADDRESS								ADDRE	ss	
CITY-ST-ZIP							CITY-S			
TITLE					DELETE		TITLE			☐ Change ☐ Addition
NAME						6.2	NAME			
STREET ADDRESS						6.3	STREET	ADDRE	ss	
CITY-ST-ZIP							CITY-S			

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.

SIGNATURE:

4-27-98 941-772-7175