

2005 FOR PROFIT CORPORATION ANNUAL REPORT


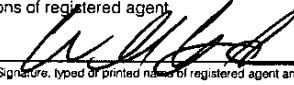
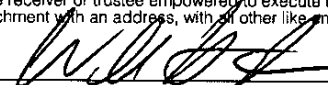
FILED
Jan 20, 2005 8:00 am
Secretary of State

01-20-2005 90024 012 ***150.00

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01062005 Chg-P CR2E034 (10/03)

DOCUMENT # P97000000491			
1. Entity Name WILLIAM H. WHITMER ARCHITECT, P.A.			
Principal Place of Business 5232 CEDAR HAMMOCK DRIVE SARASOTA, FL 34232		Mailing Address 5232 CEDAR HAMMOCK DRIVE SARASOTA, FL 34232	
2. Principal Place of Business 1714 BAY DRIVE Suite, Apt. #, etc. C-203 City & State BRADENTON, FL Zip 34207 Country USA		3. Mailing Address 1714 BAY DRIVE Suite, Apt. #, etc. C-203 City & State BRADENTON, FL Zip 34207 Country USA	
4. FEI Number 65-0718448		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WHITMER, WILLIAM 5232 CEDAR HAMMOCK DRIVE 1800 SECOND STREET SARASOTA, FL 34232		7. Name and Address of New Registered Agent Name WHITMER, WILLIAM Street Address (P.O. Box Number is Not Acceptable) 1714 BAY DRIVE C-203 City BRADENTON FL Zip Code 34207	
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 		WILLIAM H. WHITMER PRESIDENT 17 JAN 05	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	P WHITMER, WILLIAM H 5232 CEDAR HAMMOCK DRIVE SARASOTA, FL 34232 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT WHITMER, WILLIAM H 1714 BAY DRIVE UNIT C-203 BRADENTON, FL 34207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 or other like empowered.			
SIGNATURE: 		WILLIAM H. WHITMER 17 JAN 05 (41) 752-7122	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	