

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

**PROFIT
CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # P97000001325

1. Corporation Name

White Ibis Isles Corp.

Principal Place of Business

**20630 W. Highway 54
Land O' Lakes, FL 34639**

Mailing Address

**20630 W. Highway 54
Land O' Lakes, FL 34639**

3. Date Incorporated or Qualified
12/31/96

3a. Date of Last Report

2. Principal Place of Business

21 5643 White Ibis Lane

Suite, Apt. #, etc.

22

City & State

23 Land O' Lakes

Zip

24 34639

Country

25

2a. Mailing Address

26 5643 White Ibis Lane

Suite, Apt. #, etc.

27

City & State

28 Land O' Lakes

Zip

29 34639

Country

30

4. FEI Number

59-3427414

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

**Flatt, Jerry
20630 West Highway 54
Land O' Lakes, FL 34639**

81 Name

Flatt, Jerry

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

5643 White Ibis Lane

83

84 City

Land O' Lakes

FL

85 Zip Code

34639

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

Jerry Flatt
Signature of Registered Agent and file if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **Flatt, Jerry**
STREET ADDRESS **20630 West Highway 54**
CITY-ST-ZIP **Land O' Lakes, FL 34639**

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME **D, P
Flatt, Jerry**
1.3 STREET ADDRESS **5643 White Ibis Lane**
1.4 CITY-ST-ZIP **Land O' Lakes, FL 34639**

TITLE ☐ DELETE

NAME **Copenhaver, Roger**
STREET ADDRESS **18754 Wimbleton Circle**
CITY-ST-ZIP **Lutz, FL 33549**

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME **S, D
Dennis, Juanita**
2.3 STREET ADDRESS **5631 White Ibis Lane**
2.4 CITY-ST-ZIP **Land O' Lakes, FL 34639**

TITLE ☐ DELETE

NAME **T
Dennis, Robert**
STREET ADDRESS **5631 White Ibis Lane**
CITY-ST-ZIP **Land O' Lakes, FL 34639**

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME **200002276772--5**
3.3 STREET ADDRESS **-08/25/97--01173--006**
3.4 CITY-ST-ZIP ******\$50.00 ****\$50.00**

TITLE ☐ DELETE

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

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME **54 CITY-ST-ZIP**
4.3 STREET ADDRESS **61 TITLE**
4.4 CITY-ST-ZIP **62 NAME**

TITLE ☐ DELETE

NAME **63 STREET ADDRESS**
STREET ADDRESS **64 CITY-ST-ZIP**
CITY-ST-ZIP **AD**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME **65 TITLE**
5.3 STREET ADDRESS **66 NAME**
5.4 CITY-ST-ZIP **67 STREET ADDRESS**

TITLE ☐ DELETE

NAME **68 CITY-ST-ZIP**
STREET ADDRESS **69 TITLE**
CITY-ST-ZIP **70 NAME**

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME **71 STREET ADDRESS**
6.3 STREET ADDRESS **72 CITY-ST-ZIP**
6.4 CITY-ST-ZIP **73 TITLE**

14. I do 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, upon appointment with an address.

SIGNATURE:

Jerry Flatt

August 7, 1997

CR2E034 (9/96)

FILED
97 AUG 22 PM 2:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA