

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000020195

1. Entity Name

PHILIP WHITNEY CONSTRUCTION, INC.

Principal Place of Business

535 SAUNDERS ROAD SE
PALM BAY FL 32909

Mailing Address

535 SAUNDERS ROAD SE
PALM BAY FL 32909

2. Principa. Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3431914

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHITNEY, PHILIP
535 SAUNDERS ROAD SE
PALM BAY FL 32909

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME WHITNEY, PHILIP
STREET ADDRESS 535 SAUNDERS ROAD SE
CITY-ST-ZIP PALM BAY FL 32909

Delete

TITLE D/P
NAME WHITNEY, Philip
STREET ADDRESS 535 SAUNDERS ROAD SE
CITY-ST-ZIP PALM BAY, FL 32909

Change

Addition

TITLE S/T
NAME WHITNEY, KATHY
STREET ADDRESS 1826 LEMAY DR
CITY-ST-ZIP PALM BAY FL 32905

Delete

TITLE D/S/T
NAME WHITNEY, KATHY
STREET ADDRESS 1826 LEMAY DR 535 Saunders RD
CITY-ST-ZIP PALM BAY, FL 32905

Change

Addition

TITLE VP
NAME WHITNEY, JOSEPH
STREET ADDRESS 570 TARETT AVE SW
CITY-ST-ZIP PALM BAY FL 32908

Delete

TITLE D/V/P
NAME WHITNEY, JOSEPH
STREET ADDRESS 570 TARETT AVE SW
CITY-ST-ZIP PALM BAY, FL 32908

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

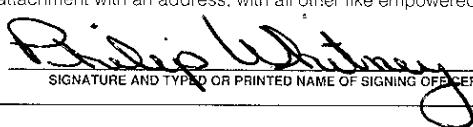
Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Philip Whitney

321-
765-1728
Daytime Phone #

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90022 034 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)