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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000068491 (4)

WHITESIDE CORPORATION, INC.

FILED Feb 23 1998 8:00am Secretary of State



NAME STREET ADDRESS CITY-ST-ZIP DELETE	Principal Plac	e of Business	Mailing Address			3 realisant une tatis Labis abrit entit entit entit entit etter fählt öffig i fill 1107 (104)		
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Section Property Tax due June 30. Yos Personal Property Tax		 				Trust Fund Contribution		
BATES, PHILLP A 125 W. ROMANA ST., STE. 800 PENSACOLA FL 32501 11. Pursuant to the provisions of Sections 807 0502 and 607 1506, Floride Statutes. the above-named corporation submits this statement for the purpose of changing its registered agent. I smit femiliar with, and accept the dispolations of, Section 607 0505, Floride Statutes. 11. Pursuant to the provisions of Sections 807 0502 and 607 1506, Floride Statutes. the above-named corporation submits this statement for the purpose of changing its registered agent. I smit femiliar with, and accept the dispolations of, Section 607 0505, Floride Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CIVI-ST-2P BATES, PHILLP A 12. MARC 13. STREET ADDRESS CIVI-ST-2P 13. STREET ADDRESS CIVI-ST-2P 14. CIVI-ST-2P 15. ITILE 16. Change 17. ITILE 17. ITILE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. Change 10. Change 10. Change 11. Additional to the provisions of Sections and the 4 septicable. 12. ITILE 22. ITILE 33. STREET ADDRESS CIVY-ST-2P 11. ITILE 42. ITILE 42. ITILE 42. ITILE 42. ITILE 43. ITILE 44. CIVI-ST-2P 15. ITILE 45. ITILE 45. ITILE 46. Change Additional Change Addition	— `		— <u> </u>	├ ─┐	y			
BATES, PHILIP A 128 W. ROMANA ST., STE. 800 PENSACOLA FL 32501 80 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807 0502 and 807 1508, Florids Statutes. The above-nemed corporation submits this statement for the purpose of changing its registered agant. I employee agant. I	24]			30				₹ №
125 W. ROMANA ST., STE. 800 PENSACOLA FL 32501 83	DAT		rrent Registered Agent	01	Name	10. Name and Address of New Hegistered	Agent	
PENSACOLA FL 32501 11. Pursuant to the provisions of Sactions 607 0502 and 607 1508. Fiorida Statutes, line above-named corporation submits this statement for the purpose of changing list registered again. I or registered again. I or both, in the Stato of Florida. Such change was submorated by the corporation's board of directors. I hereby accept the appointment as registered again. I or remains with, and accept the obligations of, Saction 607 0505, Florida Statutes. Be above-named corporation submits this statement for the purpose of changing list registered of intentions. I hereby accept the appointment as registered objects of the purpose of changing list registered objects. I hereby accept the appointment as registered objects. I hereby accept the objects and appointment as registered objects. I hereby accept the appoin				0	Name			
### City ### City ### City ### City ### City ### A City ### City #				82	Street Add	dress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Fibride Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, lam familier with and accept the obligations of, Section 607 0508, Fibride Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0508, Fibride Statutes. SIGNATURE Description Descriptio	FEN	IOAUULA FL 32001		03				
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agant, or both, in the State of Florids. Such change was submitted by the corporation's board of directors. Thereby accept the appointment as registered agant, or both, in the State of Florids. Such change was submitted by the corporation's board of directors. Thereby accept the appointment as registered segment with, and accept the obligations of, Section 607 0506, Florids Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE DELETE 11 TITLE 12 MME 13 SIREET ADDRESS CITY-ST-2P 14 CITY-ST-2P 14 CITY-ST-2P 15 TITLE DELETE 17 TITLE DELETE 18 TITLE DELETE Change Additional Addition				60				
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SIGNATURE Signature, hybrid or protect name of registered agent, or both, in the State of Fiorinas, Section 607,0505, Fioridas Statutes SIGNATURE Signature, hybrid or protect name of registered agent and stite if septicable. [NOTE: Registered Agent signature required when remeating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE BATES, PHILIP A 128 W. ROMANA ST., STE. 800 PENSACOLA FL 32501 TITLE DELETE 11 TITLE 12 STREET ADDRESS PENSACOLA FL 32501 DELETE 21 TITLE 13 STREET ADDRESS 22 AGITY-ST-ZIP DELETE 31 TITLE AMME STREET ADDRESS CITY-ST-ZIP 11 DELETE 31 TITLE AGITY ST-ZIP 12 AGITY ST-ZIP 13 STREET ADDRESS 33 STREET ADDRESS 34 CITY-ST-ZIP 14 STREET 34 STREET ADDRESS CITY-ST-ZIP 15 STREET ADDRESS CITY-ST-ZIP 16 DELETE 35 STREET ADDRESS CITY-ST-ZIP 17 DELETE 35 STREET ADDRESS CITY-ST-ZIP 18 DELETE 35 STREET ADDRESS CITY-ST-ZIP 18 DELETE 35 STREET ADDRESS CITY-ST-ZIP 36 STREET ADDRESS CITY-ST-ZIP 36 STREET ADDRESS CITY-ST-ZIP 37 STREET ADDRESS CITY-ST-ZIP 38 STREET ADDRESS CITY-ST-ZIP 39 DELETE 30 STREET ADDRESS CITY-ST-ZIP 30 DELETE 31 STREET ADDRESS 31 STREET ADDRESS 32 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP 35 STREET ADDRESS CITY-ST-ZIP 36 STREET ADDRESS CITY-ST-ZIP 37 STREET ADDRESS CITY-ST-ZIP 38 STREET ADDRESS CITY-ST-ZIP 38 STREET ADDRESS CITY-ST-ZIP 39 DELETE 30 STREET ADDRESS CITY-ST-ZIP 30 DELETE 31 STREET ADDRESS CITY-ST-ZIP 31 STREET ADDRESS CITY-ST-ZIP 31 STREET ADDRESS CITY-ST-ZIP 31 STREET ADDRESS CITY-ST-ZIP 32 STREET ADDRESS CITY-ST-ZIP 34 STREET ADDRESS CITY-ST-ZIP 35 STREET ADDRESS CITY-ST-ZIP 36 STREET ADDRESS CITY-ST-ZIP 37 STREET ADDRESS CITY-ST-ZIP 38 STREET ADDRESS CITY-ST-ZIP 38 STREET ADDRESS CITY-ST-ZIP 39 STREET ADDRESS CITY-ST-ZIP C	11 Pursuant t	o the provisions of Sections 607	0602 and 607 1509 Elorida Statu	too the show			-	
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Signature, tyroid or printed name of registered aport and title if applicable (NOTE: Registered Agent signature required when remeating) DATE	agent. Fat	n familiar with, and accept the of	bligations of, Section 607.0505, Fi	lorida Statute	S.			_
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officer or director of the corporation or the receive 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 or an attachment with an address.	officer of a	irector or the corporation or the ri	eceived or trustee empowered to i	execute this i	eport as requ	uired by Chapter 607, Florida Statutes; and that r	ny name app	pears in