

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State
 04-02-2001 90103 047 ***150.00

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DOCUMENT # P99000065562

1. Entity Name

TERRY P. WHYTE, INC.

Principal Place of Business

**5277 KEEL WAY
 FT PIERCE FL 34949**

Mailing Address

**3590 ROUNDBOTTOM RD
 PMB F107460
 CINCINNATI OH 45244-3026**

D0030404



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

215 COACH CLUB DR

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TITUSVILLE, FL

City & State

4. FEI Number

65-0937852

Applied For

Not Applicable

Zip

32780

Country

BREVARD

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**WHYTE, TERRY P
 5277 KEEL WAY
 FT PIERCE FL 34949**

7. Name and Address of New Registered Agent

Name

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

215 COACH CLUB DR

City

TITUSVILLE

FL

Zip Code

32780

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 reinstating)

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

TITLE **P** ☐ Delete
 NAME **WHYTE, TERRY P**
 STREET ADDRESS **5277 KEEL WAY**
 CITY-ST-ZIP **FT PIERCE FL 34949**

TITLE **ST** ☐ Delete
 NAME **WHYTE, JOAN G**
 STREET ADDRESS **5277 KEEL WAY**
 CITY-ST-ZIP **FT PIERCE FL 34949**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 STREET ADDRESS
 CITY-ST-ZIP

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:

TERRY P WHYTE

3/30/01

561-559-1059

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)