## 2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

## DOCUMENT # P99000103725

1. Entity Name

Principal Place of Business

SIGNATURE:

WHITAKER CONSTRUCTION COMPANY, INC.

1814 SHERATON MIDDLEBURG FI		1814 SHERATON LAKES CIR. MIDDLEBURG FL 32068				(1)00°1365-7				
2. Principal Pl	ace of Business	3. Mailing Address			_					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			$\dashv$	DO NOT WRITE	E IN THIS SE	PACE		
City & State	)	City & State			4. F	59-34/0	301.	<u> </u>	plied For t Applicable	
Zip	Country Zip Cour			у	L	Certificate of Status Desired	_ ₹	8.75 Add	itional	
	6. Name and Address of Current	Registered Agent	<del>1</del>		7. N	lame and Address of New Re				
<del></del>	O, Hame and Address at Commen			Name	·					
	AKER, JOSHUA LEE SHERATON LAKES CIR.		Stre		Street Address (P.O. Box Number is Not Acceptable)					
	LEBURG FL 32068									
				City			FL	Zip Code	•	
SIGNATURE _	named entity submits this statement for Signature, typed or printed name of registered agent	and title if applicable. (NOT	rE: Registered	Agent signature r			DATE			
Tax filing r	oration is eligible to satisfy its Intangible equirement and elects to do so. id on back)	After MAY 1, 20	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta			10. Election Campaign Fina Trust Fund Contribution			May Be to Fees	
11.	OFFICERS AND	DIRECTORS	12.		AD	DITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS	D WHITAKER, JOSHUA LEE 1814 SHERATON LAKES CIR.	☐ Delete		T ADDRESS ST-ZIP		· ·		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MIDDLEBURG FL 32068  D WHITAKER, LANCE 1814 SHERATON LAKES CIR. MIDDLEBURG FL 32068	□ Delete	TITLE NAME STREE					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	•	T ADDRESS ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete		T ADDRESS ST-2IP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS		□ Delate						☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

May 01, 2000 8:00 am Secretary of State 05-01-2000 90065 048 \*\*\*150.00