

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **S22705** (5)

1. Corporation Name:

RICHARD ALLAN WHITE AND ASSOCIATES, INC.

Principal Place of Business:

**1102 W RIVIERA BLVD
OVIDO FL 32765**

Mailing Address:

**49 ALAFAYA WOODS BLVD.
SUITE 176
OVIDO FL 32765
US**

APPROVED
AND
FILED

95 MAY -1 AM 4:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/03/1991

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0233032

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

7. This corporation has liability for alternative tax under S. 199.032

Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

21 763 DIVISION ST - OVIDO

2a. Mailing Address

26

Suite Apt # etc

Suite Apt # etc

22 City & State

23 OVIDO FL

27 City & State

28

24 **FL**

Country

25 USA

29

30

9. Name and Address of Current Registered Agent

**WHITE, RICHARD ALLAN
49 ALAFAYA WOODS BLVD., SUITE 176
OVIDO FL 32765**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0802 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

Signature of Registered Agent (if registered agent is not the corporation)

Signature of Registered Agent (if registered agent is not the corporation)

DATE

12. OFFICERS AND DIRECTORS

12a. TITLE

12b. NAME

12c. STREET ADDRESS

12d. CITY, STATE, ZIP

**PT
WHITE, RICHARD ALLAN
49 ALAFAYA WOODS BLVD., # 176
OVIDO FL**

12a. TITLE

12b. NAME

12c. STREET ADDRESS

12d. CITY, STATE, ZIP

**VS
WHITE, JEAN HAMBURG
49 ALAFAYA WOODS BLVD. #176
OVIDO FL**

12a. TITLE

12b. NAME

12c. STREET ADDRESS

12d. CITY, STATE, ZIP

12a. TITLE

12b. NAME

12c. STREET ADDRESS

12d. CITY, STATE, ZIP

12a. TITLE

12b. NAME

12c. STREET ADDRESS

12d. CITY, STATE, ZIP

12a. TITLE

12b. NAME

12c. STREET ADDRESS

12d. CITY, STATE, ZIP

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

13a. TITLE

13b. NAME

13c. STREET ADDRESS

13d. CITY, STATE, ZIP

☐ Change ☐ Addition

13a. TITLE

13b. NAME

13c. STREET ADDRESS

13d. CITY, STATE, ZIP

☐ Change ☐ Addition

13a. TITLE

13b. NAME

13c. STREET ADDRESS

13d. CITY, STATE, ZIP

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13a. TITLE

13b. NAME

13c. STREET ADDRESS

13d. CITY, STATE, ZIP

☐ Change ☐ Addition

13a. TITLE

13b. NAME

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13d. CITY, STATE, ZIP

☐ Change ☐ Addition

13a. TITLE

13b. NAME

13c. STREET ADDRESS

13d. CITY, STATE, ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.032, 199.033, Florida Statutes. I further certify that the information is filed on this annual report or supplemental annual report in line and in duplicate 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 667, Florida Statutes, and that my name appears in Block 12 or Block 13 of a change of officers or directors with my address.

SIGNATURE:

Jeane Hamburg White

SIGNATURE AND TITLE OF PRINTED NAME OF BOARD OFFICER OR DIRECTOR

4/25/95

407-366-6123