

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S64415**

(0)

1. Corporation Name

GREG WHITTIER TRUCKING, INC.



Principal Place of Business

**1251 MUSTANG ST.
NOKOMIS FL 34275
US**

Mailing Address

**1251 MUSTANG STR
NOKOMIS FL 34275
US**

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

**WHITTIER, GREG R.
1251 MUSTANG ST
NOKOMIS FL 34275**

3. Date Incorporated or Qualified
07/01/1991

3a. Date of Last Report
04/28/1995

4. FEI Number
65-0270492

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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

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 607.0602 and 607.1505, 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, thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0602, Florida Statutes.

SIGNATURE

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WHITTIER, GREG R.
1251 MUSTANG ST.
NOKOMIS FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WHITTIER, JANEY
1251 MUSTANG ST.
NOKOMIS FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
15 CITY-STATE-ZIP
16 NAME
17 STREET ADDRESS
18 CITY-STATE-ZIP
19 CITY-STATE-ZIP
20 NAME
21 STREET ADDRESS
22 CITY-STATE-ZIP
23 CITY-STATE-ZIP
24 CITY-STATE-ZIP
25 NAME
26 STREET ADDRESS
27 CITY-STATE-ZIP
28 CITY-STATE-ZIP
29 NAME
30 STREET ADDRESS
31 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and checked carefully for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 its president or business authorized 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 on an attached sheet with an address.

SIGNATURE: *Greg Whittier* *Janey Whittier*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-96 485-3628
Date Printed Name

CR2E034 (12/95)