

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 08, 2004 8:00 am**  
**Secretary of State**

06-08-2004 90002 013 \*\*\*150.00

**DOCUMENT # V17102**

1. Entity Name  
**WHITT FAMILY INVESTMENT CORPORATION**



Principal Place of Business  
**5712 21ST AVENUE WEST  
BRADENTON, FL 34209 US**

Mailing Address  
**5712 21ST AVE WEST  
BRADENTON, FL 34209 US**

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

03062003 Chg-P CR2E034 (10/03)

4. FEI Number  
**65-0327083**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**WHITT, GERALD G.  
5712 21ST AVENUE WEST  
BRADENTON, FL 34209**

7. Name and Address of New Registered Agent  
Name **JASON M. DEPAOLA**  
Street Address (P.O. Box Number is Not Acceptable)  
**1205 MANATEE AVENUE WEST**  
City **BRADENTON** FL Zip Code **34205**

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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE *[Signature]* **JASON M. DEPAOLA** **05/26/2004**  
(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITT, GERALD G. 5712 21ST AVE WEST BRADENTON, FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SARAH E. ANDERSON 330 FOREST DRIVE SWEETWATER, AL 36782</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **SARAH E. ANDERSON, PRES.** **5/28/04** **251-662-6893**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

44046238

#V17102

**PORGES HAMLIN KNOWLES & PROUTY, PA**

**ATTORNEYS AT LAW**

JOHN D. BONANNO\*\*\*  
JASON M. DEPAOLA  
JENNIFER L. FURY\*\*\*  
CURTIS D. HAMLIN\*  
JAMES A. HARRISON\*\*  
KEVIN J. KAPUSTA  
TIMOTHY A. KNOWLES  
JOSEPH L. NAJMY\*\*  
GREGORY J. PORGES\*\*\*  
STEVEN W. PROUTY  
STEPHEN W. THOMPSON  
RICHARD A. WELLER

OF COUNSEL:  
SHELLY A. GALLAGHER  
HARRY W. HASKINS\*

**BRADENTON**  
1205 MANATEE  
AVENUE WEST  
BRADENTON, FL 34205  
TEL: (941) 748-3770  
FAX: (941) 748-4160

**LAKEWOOD RANCH**  
6320 VENTURE DRIVE  
SUITE 104  
BRADENTON, FL 34202  
TEL: (941) 907-3216  
FAX: (941) 907-3947

**SARASOTA**  
3400 SOUTH TAMiami TRAIL  
SUITE 201  
SARASOTA, FL 34239  
TEL: (941) 366-1388  
FAX: (941) 953-4284

\* BOARD CERTIFIED  
REAL ESTATE LAWYER  
\*\* ALSO CERTIFIED  
PUBLIC ACCOUNTANT

\*\*\* ALSO ADMITTED IN NEW YORK

+ ALSO ADMITTED IN IOWA

++ ALSO ADMITTED IN MINNESOTA

+++ ALSO ADMITTED IN VIRGINIA

June 4, 2004

VIA CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

REPLY TO:

Bradenton

Division of Corporations  
Post Office Box 1500  
Tallahassee, FL 32302-1500

**Re: Whitt Family Investment Corporation**  
**FEI#: 65-0327083**  
**OFN: 5770-05**

To Whom It May Concern:

Enclosed please find a fully completed, signed and dated 2004 For Profit Corporation Annual Report for the above-referenced Corporation. Pursuant to my telephone conversation with one of your representatives in mid-May, the Representative assured me that the Corporation would not be subject to the \$400 late filing fee as long as I provided a letter explaining the extenuating circumstances as to why the Annual Report for the Corporation is being filed late.

Dr. Gerald G. Whitt served as the Sole Director and Officer for the Corporation. In 2003, he was diagnosed with a health condition that rendered him unable to properly fulfill his duties as the Director and Officers of the Corporation. His health condition deteriorated until the date of his death on May 8, 2004. Prior to his death, Dr. Whitt was unable to properly manage his affairs due to his health conditions and, as a result, he failed to timely file the Annual Report. Based on the foregoing, it is respectfully requested that the late filing fee for the Corporation's 2004 Annual Report be waived in full and that the Division of Corporations accept the enclosed check for \$150 for the Annual Report fee.

If you have any questions or comments about the foregoing, please do not hesitate to contact me at 941-748-3770.

Sincerely,

Jason M. DePaola  
Firm Associate  
Email: [jmd@phkplaw.com](mailto:jmd@phkplaw.com)

JMD:jms  
Enclosures