


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90077 046 ***150.00

DOCUMENT # V29298	
1. Entity Name WHIGHAM'S CITRUS PACKING HOUSE MACHINERY, INC.	

Principal Place of Business 10525 STATE RD 60 VERO BEACH FL 32966	Mailing Address Whigham Citrus Packinghouse Machinery, Inc. P.O. Box 690185 Vero Beach, FL 32969-0185
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2. Principal Place of Business - No P.O. Box # 10525 State Rd 60	3. Mailing Address Suite, Apt. #, etc. VERO Beach
City & State FL	City & State
Zip 32966	Country INDIAN RIVER



1st MOORE CR2E034 (10/06)

4. FEI Number 59-3113042		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent WHIGHAM, DANIEL P 10525 20TH ST VERO BEACH FL 32966		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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: *Daniel Whigham* DATE: 2-1-07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD WHIGHAM, DANIEL P 10525 20TH ST VERO BEACH FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Daniel Whigham* 2-1-07 772-569-7190

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #