

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000219143

Entity Name: WHALEN PROFESSIONAL SERVICES, LLC

Current Principal Place of Business:

2559 PLEASANT VALLEY DR
CANTONMENT, FL 32533

Current Mailing Address:

2559 PLEASANT VALLEY DR
CANTONMENT, FL 32533

FEI Number: 87-4255528

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHALEN, KENNETH J PRES
2559 PLEASANT VALLEY DR
CANTONMENT, FL 32533 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title VP
Name WHALEN, ALICIA C
Address 2559 PLEASANT VALLEY DR
City-State-Zip: CANTONMENT FL 32533

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALICIA C WHALEN

VP

02/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date