

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 643702

FILED  
Apr 15, 2004  
Secretary of State

Entity Name: WHISTLE STOP, LTD., INC.

## Current Principal Place of Business:

380 SEMORAN COMMERCE PL.  
A-112  
APOPKA, FL 32703 US

## New Principal Place of Business:

## Current Mailing Address:

380 SEMORAN COMMERCE PL  
A-112  
APOPKA, FL 32703 US

## New Mailing Address:

FEI Number: 59-3044303

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHUTZ, JOHN  
1401 HEIM RD.  
MT DORA, FL 32757 US

## Name and Address of New Registered Agent:

SCHUTZ, JOHN  
235 SOUTH BOYD ST  
WINTER GARDEN, FL 34787 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: JOHN SCHUTZ

04/15/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: SCHUTZ, MICHAEL,  
Address: 803 SEMORAN BLVD.  
City-St-Zip: APOPKA, FL

Title: ST ( ) Delete  
Name: SCHUTZ, ROBERT,  
Address: 803 SEMORAN BLVD  
City-St-Zip: APOPKA, FL

Title: P ( ) Delete  
Name: SCHUTZ, JOHN,  
Address: 803 SEMORAN BLVD.  
City-St-Zip: APOPKA, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN SCHUTZ

P

04/15/2004

Electronic Signature of Signing Officer or Director

Date