## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 643702** 

Entity Name: WHISTLE STOP, LTD., INC.

803 SEMORAN BLVD.

APOPKA, FL

Address: City-St-Zip: FILED Apr 12, 2005 Secretary of State

Littly Nai	ile. Willion	LE STOF,	LTD., INC.						
Current Principal Place of Business:					New Principal Place of Business:				
380 SEMORAN COMMERCE PL. A-112 APOPKA, FL 32703 US					235 SOUTH BOYD STREET WINTER GARDEN, FL 34787 US				
Current Mailing Address:					New Mailing Address:				
A-112	80 SEMORAN COMMERCE PL A-112 APOPKA, FL 32703 US				PO BOX 771031 WINTER GARDEN, FL 34777 US				
FEI Number:	59-3044303	FEI Nu	mber Applied For ( )	FEI Nun	nber Not Appli	cable ( )	Certific	ate of Status Des	ired ( )
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:				
WINTER G	H BOYD ST BARDEN, FL named entit		US this statement for the p	ourpose o	f changing it	s registere	ed office or	registered ager	nt, or both,
	of Florida.								
SIGNATUF		onic Signa	ture of Registered Age	ent				Date	
Election Can		ŭ	und Contribution ( ).						
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	V SCHUTZ, MIC 803 SEMORA APOPKA, FL	AN BLVD.			Title: Name: Address: City-St-Zip:		( ) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	ST SCHUTZ, RC 803 SEMORA APOPKA, FL	AN BLVD			Title: Name: Address: City-St-Zip:		( ) Change	( ) Addition	
Title: Name:	P SCHUTZ, JO	()Delete HN,			Title: Name:	P SCHUTZ, J		( ) Addition	

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.

Address:

City-St-Zip:

235 SOUTH BOYD STREET

WINTER GARDEN, FL 34787

SIGNATURE: JOHN SCHUTZ P 04/12/2005