2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 23, 2007 8:00 am Secretary of State **DOCUMENT #650513** 04-23-2007 90070 022 ***150.00 1. Entity Name CHARLES S. WHITESIDE, INC. Principal Place of Business Mailing Address 40014000 250 TRUCK & TRAILER WAY 250 TRUCK & TRAILER WAY W PALM BCH, FL 33413 W PALM BCH, FL 33413 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04132007 Chq-P CR2E034 (12/06) City & State City & State Applied For 4. FEI Number 59-1968075 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COMMANDER, JONATHAN **4524 GUN CLUB RD STE 105** Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH, FL 33415 City 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution, Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE XX Delete TITLE ☐ Change ☐ Addition MILLER, CARL R NAME NAME STREET ADDRESS 1233 HAVERHILL RD STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33417 CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition EVERETT, LYNN M NAME NAME STREET ADDRESS **577 S COUNTRY CLUB DRIVE** STREET ADDRESS CITY-ST-78P ATLANTIS, FL 33462 CITY-ST-ZIP VP/D TITLE ☐ Delete TITLE XX Chance ☐ Addition WHITESIDE, CHARLES S NAME NAME Charles S. Whiteside STREET ADDRESS 631A MARLBORO OVAL STREET ADDRESS 3679A Willow Bend Rd. CITY-ST-ZIP LAKE WORTH, FL 33467 CITY-ST-ZIP Lake Worth, Fl. 33463 TITLE DP □ Delete TITLE Change ☐ Addition NAME EVERETT, JOHN M NAME STREET ADDRESS **577 S COUNTRY CLUB DRIVE** STREET ADDRESS CITY-ST-ZiP ATLANTIS, FL 33462 CITY-ST-ZIP TITLE Detete THILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report of 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 of the redever 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

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4/16/07 561 471-7696

Daytime Phone #