

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000010

FILED
Jan 11, 2005
Secretary of State

Entity Name: WHITSYMS LIMITED INCORPORATED

Current Principal Place of Business:

100 E LINTON BLVD
506 B
DELRAY BCH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

100 E LINTON BLVD
506 B
DELRAY BCH, FL 33483 US

New Mailing Address:

FEI Number: 65-0639453 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANDERSON, DONOVAN
9811 SALT WATER CREEK CT.
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANDERSON, DONOVAN B
Address: 9811 SALT WATER CREEK CT.
City-St-Zip: LAKE WORTH, FL 33467

Title: VP () Delete
Name: PELTZIE, KENNETH G
Address: 2260 RABBIT HOLLOWE CIR.
City-St-Zip: DELRAY BEACH, FL 33445

Title: T () Delete
Name: ANDERSON, DONOVAN B
Address: 9811 SALT WATER CREEK CT.
City-St-Zip: LAKE WORTH, FL 33467

Title: S () Delete
Name: ANDERSON, KIMBERLEY D
Address: 6963 BLUE SKIES DR.
City-St-Zip: LAKE WORTH, FL 33463

Title: V () Delete
Name: ANDERSON, BEVERLY
Address: 9811 SALT WATER CREEK CT.
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: GILLETTE, WAYNE A
Address: 7 VIA DE CASAS NORTE
City-St-Zip: BOYNTON BEACH, FL 33426

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

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

Title: VP (X) Change () Addition
Name: ANDERSON, BEVERLY
Address: 9811 SALT WATER CREEK CT.
City-St-Zip: LAKE WORTH, FL 33467

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: D. ANDERSON

P

01/11/2005

Electronic Signature of Signing Officer or Director

_____ Date