

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 21 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K06689

(9)

1. Corporation Name
WHERE ELSE, INC.

Principal Place of Business

7210 UMLERTON RD
LARGO FL 34841
US

Mailing Address

7210 UMLERTON RD
LARGO FL 33771-4831
US3. Date Incorporated or Qualified
12/14/19873a. Date of Last Report
03/26/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

59-2865066

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☒ Yes☐ No

9. Name and Address of Current Registered Agent

SCHWANDT, WILLIAM
14810 RUE DE BAYONNE
CLEARWATER FL 34622

10. Name and Address of New Registered Agent

81 Name WILLIAM SCHWANDT

82 Street Address (P.O. Box Number is Not Acceptable)
13716 MARSEILLES CT.

83

84 City CLEARWATER

FL

85 Zip Code 34622

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME SCHWANDT, ELLEN
STREET ADDRESS 14810 RUE DE BAYONNE
CITY- ST- ZIP CLEARWATER FL
☐ DELETETITLE VP
NAME CHUNG, DAVAN
STREET ADDRESS 9217 AMITY COURT
CITY- ST- ZIP ORLANDO FL
☒ DELETETITLE S
NAME SCHWANDT, WILLIAM
STREET ADDRESS 14810 RUE DE BAYONNE
CITY- ST- ZIP CLEARWATER FL
☐ DELETETITLE T
NAME SOUTHAL, NORMA JEAN
STREET ADDRESS 17620 PACIFIC HWY S
CITY- ST- ZIP SEATTLE WA
☒ DELETETITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ DELETETITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE SAME
12 NAME SAME
13 STREET ADDRESS 13716 MARSEILLES CT
14 CITY- ST- ZIP 34622
☐ Change ☐ Addition21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP
☐ Change ☐ Addition31 TITLE SAME
32 NAME SAME
33 STREET ADDRESS 13716 MARSEILLES CT
34 CITY- ST- ZIP 34622
☒ Change ☐ Addition41 TITLE T
42 NAME SCHWANDT WILLIAM
43 STREET ADDRESS 13716 MARSEILLES CT.
44 CITY- ST- ZIP CLEARWATER FL 34622
☐ Change ☐ Addition51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP
☐ Change ☐ Addition61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William Schwandt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-97

Date

813-538-8790

Daytime Phone #

CR2E034 (9/96)