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PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L85497

(0)

1. Corporation Name

WHISTLE PIG, INC.

Principal Place of Business

C/O JEFFREY C. SHANNON  
501 E KENNEDY BLVD. S-1700  
TAMPA FL 33602

Mailing Address

C/O JEFFREY C. SHANNON  
501 E KENNEDY BLVD. S-1700  
TAMPA FL 33602-4988

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97 MAY -1 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHANNON, JEFFREY C.  
501 E KENNEDY BLVD.  
S-1700  
TAMPA FL 33602

81 Name

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

83

84 City

FL

85 Zip Code

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DVT  
NAME EDWARDS, JOSEPH E., III  
STREET ADDRESS 206 N. MILL ST. #100  
CITY-ST-ZIP ASPEN CO

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 502 Main Street, #210  
1.4 CITY-ST-ZIP Carbondale, Colorado 81623

TITLE DV  
NAME HERNDON, HOWARD W.  
STREET ADDRESS 4305 BROOKS AVENUE  
CITY-ST-ZIP NASHVILLE TN

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS 4430 Tyne Boulevard  
2.4 CITY-ST-ZIP Nashville, Tennessee 37215

TITLE DS  
NAME SHANNON, JEFFREY C.  
STREET ADDRESS 501 E KENNEDY BLVD #1700  
CITY-ST-ZIP TAMPA FL

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE PD  
NAME LACKEY, RAYMOND D.  
STREET ADDRESS 126 HAVENFORD DRIVE  
CITY-ST-ZIP NASHVILLE TN

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS 5821 Beauregard Drive  
4.4 CITY-ST-ZIP Nashville, Tennessee 37215

TITLE VD  
NAME REYNOLDS, ROBERT C.  
STREET ADDRESS 1075 ANAHO ROAD  
CITY-ST-ZIP ATLANTA GA

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS 3145 W. Roxboro Road  
5.4 CITY-ST-ZIP Atlanta, Georgia 30324

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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, changed, or on an attachment with an address.

SIGNATURE:

Jeffrey C. Shannon  
NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97

Date

813 228-7411

Daytime Phone #

0052904

CR2E034 (9/96)