

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L85497

FILED
Jul 09, 2004
Secretary of State

Entity Name: WHISTLE PIG, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-3024595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVT () Delete
Name: EDWARDS, JOSEPH E., III
Address: 502 MAIN STREET, #210
City-St-Zip: CARBONDALE, CO 81623

Title: DV () Delete
Name: HERNDON, HOWARD W.,
Address: 4430 TYNE BLVD
City-St-Zip: NASHVILLE, TN 37215

Title: DS () Delete
Name: SHANNON, JEFFREY C.,
Address: 501 E KENNEDY BLVD #1700
City-St-Zip: TAMPA, FL

Title: PD () Delete
Name: LACKEY, RAYMOND D.,
Address: 703 ARUNDEL PLACE
City-St-Zip: ANNAPOLIS, MD 21401

Title: VD () Delete
Name: REYNOLDS, ROBERT C.,
Address: 3145 W. ROXBORO RD
City-St-Zip: ATLANTA, GA 30324

Title: VD () Delete
Name: EVANS, DAVID
Address: 6026 ROSE AVE
City-St-Zip: HOUSTON, TX 77007

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: JEFFREY C. SHANNON

S

07/09/2004

Electronic Signature of Signing Officer or Director

Date