## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# L86293

Name:

Address:

City-St-Zip:

WHIPPO, CASEY JAMES

ENGLEWOOD, FL 34224

2800 WORTH AVENUE

FILED Oct 04, 2005 Secretary of State

Entity Nan	ne: WHIPF	PO CO., INC.				
Current Principal Place of Business:				New Principal Place of Business:		
2800 WOR ENGLEWO		224				
Current Mailing Address:				New Mailing Address:		
2800 WOR ENGLEWO		224				
FEI Number:	59-3017975	FEI Number Appl	ied For ( ) FEI Nu	mber Not Appl	icable ( ) Certificate o	of Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
HANEWING 2650 SOUT ENGLEWO	TH MCCAL	ROAD				
The above in the State		ty submits this state	ment for the purpose o	of changing it	s registered office or regis	stered agent, or both,
SIGNATUR	RE: DEAN	HANEWINCKEL				
	Elect	ronic Signature of Re	egistered Agent		Dat	te
		.193(2)(b), F.S., the cor cing Trust Fund Contrib	poration did not receive oution ( ).	the prior notice	э.	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VP WHIPPO, CI 2800 WORT ENGLEWOO			Title: Name: Address: City-St-Zip:	()Change()A	Addition
Title: Name: Address: City-St-Zip:	P WHIPPO, CI 2800 WORT ENGLEWOO			Title: Name: Address: City-St-Zip:	PST (X) Change ( ) A WHIPPO, CHARLES III 2800 WORTH AVENUE ENGLEWOOD, FL 34224	Addition
Title:	D	(X) Delete		Title:	( ) Change ( ) A	Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: CHARLES WHIPPO IV VP 10/04/2005