

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000100827

Entity Name: WHO, INC.

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1501 SHEPHERD ROAD  
STE # 5  
LAKELAND, FL 33811

**New Principal Place of Business:**

**Current Mailing Address:**

1501 SHEPHERD ROAD  
STE #5  
LAKELAND, FL 33811

**New Mailing Address:**

1501 SHEPHERD ROAD  
STE # 5  
LAKELAND, FL 33811

FEI Number: 59-3724446

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HODGES, CARLTON D  
1501 SHEPHERD RD,  
STE 5  
LAKELAND, FL 33811 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

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: HODGES, CARLTON D  
Address: 1501 SHEPHERD ROAD #5  
City-St-Zip: LAKELAND, FL 33811

I hereby 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 all other like empowered.

SIGNATURE: CARLTON D HODGES

PTSD

04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date