2002 Uniform Business Report (UBR)

Mar 14, 2002 8:00 am Secretary of State P01000086922 DOCUMENT # 1. Entity Name WHETROCK CORP. 03-14-2002 90065 037 ***150 00 Principal Place of Business Mailing Address 4926 88TH ST.EAST 4926 88TH ST.EAST **BRADENTON FL 34211 BRADENTON FL 34211** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **BUNCH, LARRY** Street Address (P.O. Box Number is Not Acceptable) 4926 88TH ST. EAST **BRADENTON FL 34211** City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (9/01) TITLE ☐ Delete TITLE Change | ☐ Addition NAME BUNCH, LARRY STREET ADDRESS 4926 88TH ST. EAST STREET ADDRESS **BRADENTON FL 34211** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE [7] Change ☐ Addition HIGGINBOTHAM, DON NAME NAME STREET ADDRESS 755 S. PALM AVE. STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34236 CITY-ST-ZIP Change TITI F ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE . Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP

I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other-like empowered.

SIGNATURE: 4