FILED

Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90125 047 ***158 75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT # P01560 1. Entity Name

WHITEHALL PRINTING COMPANY



Principal Place of Business Mailing Address وينهندون **4244 CORPORATE SQUARE** 4244 CORPORATE SQUARE NAPLES FL 34104 NAPLES FL 34104 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 36-2420248 Not Applicable Zip Country Zip 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 HIRSCH, EMIL G Street Address (P.O. Box Number is Not Acceptable) **4244 CORPORATE SQUARE** SUITE B NAPLES FL 34104 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. I am familiar with, and accept the obligations of registered agent. 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 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE ☐ Addition HIRSCH, MYRON A. NAME NAME **4244 CORPORATE SQUARE** STREET ADDRESS STREET ADDRESS CITY-ST-7IP NAPLES FL 34104 CITY-ST-ZIP TITLE **VSD** ☐ Delete TITLE ☐ Change ☐ Addition HIRSCH, EMIL G. NAME STREET ADDRESS **4244 CORPORATE SQUARE** STREET ADDRESS CITY-ST-ZIP NAPLES FL 34104 CITY-ST-ZIP TITLE ۷D ☐ Delete TITLE Change ☐ Addition NAME HIRSCH, HARRIET NAME STREET ADDRESS **4244 CORPORATE SQUARE** STREET ADDRESS CITY-ST-ZIP NAPLES FL 34104 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME HIRSCH, JEFFREY W. NAME STREET ADDRESS **4244 CORPORATE SQUARE** STREET ADDRESS CITY-ST-ZIP NAPLES FL 34104 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. 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 10 or Block 11 if

CITY-ST-ZIP

SIGNATURE:

CR2E034 (10/02)