

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085359

FILED
Feb 23, 2004
Secretary of State

Entity Name: WHITE HILLS ASSET MANAGEMENT, INC.

Current Principal Place of Business:

951 LEVITT PARKWAY
ROCKLEDGE, FL 32955

New Principal Place of Business:

433 COBBLEWOOD DR
ROCKLEDGE, FL 32955

Current Mailing Address:

951 LEVITT PARKWAY
ROCKLEDGE, FL 32955

New Mailing Address:

433 COBBLEWOOD DR
ROCKLEDGE, FL 32955

FEI Number: 20-0019938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRASWELL, DENNIS
951 LEVITT PARKWAY
ROCKLEDGE, FL 32955

Name and Address of New Registered Agent:

BRASWELL, JEFF
433 COBBLEWOOD DR
ROCKLEDGE, FL 32955

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: JEFF BRASWELL

02/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BRAGWON, JEFFERY
Address: 72 LITTLE FOXRUN
City-St-Zip: SHELTON, CT 06484

Title: D () Delete
Name: BRASWELL, DIANNE
Address: 72 LITTLE FOX RUN
City-St-Zip: SHELTON, CT 06484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BRASWELL, JEFFERY
Address: 433 COBBLEWOOD DR
City-St-Zip: ROCKLEDGE, FL 32955

Title: D (X) Change () Addition
Name: BRASWELL, DIANE
Address: 433 COBBLEWOOD DR
City-St-Zip: ROCKLEDGE, FL 32955

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: DIANE BRASWELL

D

02/23/2004

Electronic Signature of Signing Officer or Director

Date