

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000043822

Entity Name: LYNN A. WHELPLEY, P.A.

FILED
Mar 15, 2006
Secretary of State

Current Principal Place of Business:

742 ALTONA ST. NW
PALM BAY, FL 32907 US

New Principal Place of Business:

1748 WINDING RIDGE CIRCLE
PALM BAY, FL 32909 US

Current Mailing Address:

742 ALTONA ST. NW
PALM BAY, FL 32907 US

New Mailing Address:

1748 WINDING RIDGE CIRCLE
PALM BAY, FL 32909 US

FEI Number: 20-2555061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHELPLEY, RONALD J
742 ALTONA STREET NW
PALM BAY, FL 32907 US

Name and Address of New Registered Agent:

WHELPLEY, RONALD J
1748 WINDING RIDGE CIRCLE
PALM BAY, FL 32909 US

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: RONALD J WHELPLEY

03/15/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WHELPLEY, LYNN A
Address: 742 ALTONA ST. NW
City-St-Zip: PALM BAY, FL 32907 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WHELPLEY, LYNN A
Address: 1748 WINDING RIDGE CIRCLE
City-St-Zip: PALM BAY, FL 32909 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LYNN A WHELPLEY

PRES

03/15/2006

Electronic Signature of Signing Officer or Director

Date