2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000055704

Entity Name: WHITSYMS INC.

FILED May 11, 2010 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

WHITSYMS NURSING REGISTRY 2605 W ATLANTIC AVE - BLDG., B- 101-103B DELRAY BEACH, FL 33445

Current Mailing Address: New Mailing Address:

WHITSYMS NURSING REGISTRY 2605 W ATLANTIC AVE - BLDG B-STE 101-103B DELRAY BEACH, FL 33445

FEI Number: 75-3242060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BEALE, DAVID A DAVID A. BEALE, P.A. 355 NE 5TH AVE - STE 1 DELRAY BEACH, FL 33483 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: [

Name: ANDERSON, DONOVAN B P

Address: 2605 W ATLANTIC AVE-BLDG B - STE 101-103B

City-St-Zip: DELRAY BEACH, FL 33445

Title: VP

Name: ANDERSON, BEVERLY Y VP

Address: 2605 W ATLANTIC AVE-BLDG B - STE 101-103B

City-St-Zip: DELRAY BEACH, FL 33445

Title: S

Name: DOUGLAS, KIMBERLEY O S

Address: 2605 W ATLANTIC AVE-BLDG B - STE 101-103B

City-St-Zip: DELRAY BEACH, FL 33445

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: D.ANDERSON P 05/11/2010