

## **2005 FOR PROFIT CORPORATION** ANNUAL REPORT

## May 03, 2005 8:00 am Secretary of State 05-03-2005 90170 019 \*\*\*150.00 DOCUMENT # P18190 1. Entity Name WH INTEREST, INC. SCOCCOON Principal Place of Business Mailing Address HARBOUR ISLAND HOTEL 1950 STEMMONS FREEWAY 725 S HARBOR ISLAND **SUITE 6001** DALLAS, TX 75207 TAMPA, FL 33602 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04272005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Not Applicable 75-2222450 Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CEOP TITLE ☐ Delete TITLE KLEISNER FRED NAME NAME STREET ADDRESS 1950 STEMMONS FREEWAY, SUITE 6001 STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75207 CITY-ST-ZIP CEVP TITLE Delete TITLE ☐ Change ☐ Addition NAME TENG, TED NAME STREET ADDRESS 1950 STEMMONS FREEWAY, SUITE 6001 STREET ADDRESS CITY-ST-7IP DALLAS, TX 75207 CITY-ST-7IP CEVP TITLE Delete TITLE Addition SMITH, RICK NAME NAME 1950 STEMMONS FREEWAY, SUITE 6001 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75207 CITY-ST-ZIP ☐ Addition SVI DITE ☐ Delete TITLE Hendrick Stemmons Frey # 6001 NAME HENDRICK, JUDY NAME Judy 1950 STEMMONS FREEWAY, SUITE 6001 STREET ADDRESS STREET ADORESS DALLAS, TX 75207 CITY-ST-ZIP CITY-ST-ZIP **SVAS** ☐ Delete TITLE ☐ Addition ☐ Chappe TIME NAME CHLOUPOK, MARK NAME 1950 STEMMONS FRWY ST 6001 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS, TX 75207 Treasuren ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Dalla

12. I hereby certify that the information supplied with this filling 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 changed, or on an attach with all other like empowered

SIGNATURE:

**FILED**