

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000019141 (8)

1. Corporation Name

WHG MANAGEMENT, INC.



Principal Place of Business

800 SECOND AVENUE NE
ST PETERSBURG FL 33701

Mailing Address

P.O. BOX 548
ST PETERSBURG FL 33731

2. Principal Place of Business

21 Suite, Apt., etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt., etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

GRIFFITH, WILLIAM H
800 SECOND AVENUE NE
ST PETERSBURG FL 33701

3. Date Incorporated or Created
03/11/1994

3a. Date of Last Report
03/09/1995

4. FLTN Number
59-3228589

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contributor

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.06(1) and 607.06(2), Florida Statutes, the above named corporation certifies this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. The act, except the appointment of registered agent, I am familiar with, and accept the obligations of, Sections 607.06(1), Florida Statutes.

SIGNATURE

Signature of person authorized to execute this statement

Signature of person authorized to execute this statement

Date

12. OFFICERS AND DIRECTORS

12a. NAME

D GRIFFITH, WILLIAM H
800 SECOND AVENUE NE
ST PETERSBURG FL 33701

12b. TITLE

12c. STREET ADDRESS

12d. CITY-STATE-ZIP

12e. TITLE

12f. NAME

12g. STREET ADDRESS

12h. CITY-STATE-ZIP

12i. TITLE

12j. NAME

12k. STREET ADDRESS

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