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mpfangen von: 941 364 8156

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Secretary of State
04-19-2004 90529 001 ***300.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000030350

1. Entity Name
WHISPERING PALMS, INC.

Principal Place of Business	Mailing Address
1858 RINGLING BLVD SARASOTA, FL 34236 US	46 N WASHINGTON BLVD #1 SARASOTA, FL 34236
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

03232004 Chg-P CR2E034 (10/03)

4. FEI Number: 65-0588576 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PATTERSON, JOHN 46 N WASHINGTON BLVD #1 SARASOTA, FL 34236	Name: LPS CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable): 46 N. WASHINGTON BLVD. SUITE 1 City: SARASOTA FL Zip Code: 34236

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 — 3/23/04 DATE
NOTE: Registered Agent signature required when reinstating
By: JOHN PATTERSON, its President

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	OPT BOTTCHER, HANS-HERMANN G 1858 RINGLING BLVD SARASOTA, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS MCLOUGHLIN, KARIN 1858 RINGLING BLVD SARASOTA, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i) [redacted] es. 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 [redacted] der 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, Flo[redacted] my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ______ 4-8-04 941 364 8156
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
HANS-HERMANN GUSTAV BOTTCHER, President