

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P96000022370

1. Entity Name
THE WHITESIDE GROUP, INC.



Principal Place of Business
8470 BELVEDERE ROAD
WEST PALM BEACH, FL 33411

Mailing Address
8470 BELVEDERE ROAD
WEST PALM BEACH, FL 33411

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02202007

Chg-P

CR2E034 (12/06)

4. FEI Number

65-0671422

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

HARMON, BLAKE M
4701 N. FEDERAL HIGHWAY
SUITE 480, BOX A-6
POMPANO BEACH, FL 33064

Name

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

City

FL

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 reconstituting)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

800092305438
03/13/07--01006--021 **61.25

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME WHITESIDE, ANDREW
STREET ADDRESS 3281 PERIMETER DR.
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE VPAS ☐ Change ☒ Addition
NAME Whiteside, Stacy K.
STREET ADDRESS 700 W. Pine Street
CITY-ST-ZIP Wytheville, VA 24382

TITLE VP ☐ Delete
NAME WHITESIDE, DARRELL
STREET ADDRESS 5173 WOODLAND DR.
CITY-ST-ZIP DELRAY BEACH, FL 33484

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST ☐ Delete
NAME WHITESIDE, MARY K
STREET ADDRESS 847 DIXIE AVENUE
CITY-ST-ZIP MADISON, GA 30650

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE COO ☐ Delete
NAME WHITESIDE, CLARENCE L
STREET ADDRESS 3281 PERIMETER DRIVE
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPAS ☐ Delete
NAME WHITESIDE, DUSTIN T
STREET ADDRESS 700 WEST PINE STREET
CITY-ST-ZIP WYTHEVILLE, VA 24382

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME BOYLES, JUDY
STREET ADDRESS 102 PRINCESS CT
CITY-ST-ZIP ROYAL PALM BEACH, FL 33411

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attachment with an address, with all other like empowered.

SIGNATURE:

Judy Boyles, Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/07

561-753-8210

#124

Daytime Phone #

3/5

21

FILED

2007 MAR -5 PM 3:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

