

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 21, 1999 8:00 am  
Secretary of State

05-21-1999 90007 025 \*\*\*150.00

DOCUMENT # P97000029456

1. Corporation Name  
WHALEN2, INC.



Principal Place of Business  
3813 SOUTHVIEW DRIVE  
BRADENTON FL 33511

Mailing Address  
3813 SOUTHVIEW DRIVE  
BRADENTON FL 33511

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
03/31/1997

4. FEI Number  
59-3434909

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 9280 Bay Plaza Blvd.

2a. Mailing Address

26 9280 Bay Plaza Blvd.

Suite, Apt. #, etc.

22 Suite 714

Suite, Apt. #, etc.

27 Suite 714

City & State

23 Tampa, FL

City & State

28 Tampa, FL

Zip

24 33511

Country

25 USA

Zip

29 33511

Country

30 USA

9. Name and Address of Current Registered Agent

WHALEN, DAVID G  
3813 SOUTHVIEW DRIVE  
BRADENTON FL 33511

10. Name and Address of New Registered Agent

81 Name

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

83 9280 Bay Plaza Blvd.

84 Suite 714

85 City Tampa

FL

86 Zip Code 33511

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME WHALEN, DAVID F

STREET ADDRESS 3813 SOUTHVIEW DRIVE

CITY-ST-ZIP BRADENTON-FL 33511

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 9280 Bay Plaza Blvd. Suite 714

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David G. Whalen

Date

Daytime Phone #

5-1-99 (813) 620-3103

CR2E034 (11/98)

0376222