

2005 FOR PROFIT CORPORATION ANNUAL REPORT

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Jan 25, 2005 08:00 AM
Secretary of State

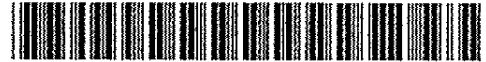
DOCUMENT # P98000047073

1. Entity Name
WHISTLEBLOWING SOLUTIONS, INC.



Principal Place of Business
1390 WINDY RIDGE COURT
LONGWOOD, FL 32750

Mailing Address
1390 WINDY RIDGE COURT
LONGWOOD, FL 32750



01102005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3511065

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

REHMAN, DONALD I
1390 WINDY RIDGE COURT
LONGWOOD, FL 32750

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IN THIS SPACE**

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 relocating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

U00000196158
01/26/05-80059-002 158.75

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTSD
REHMAN, DONALD I
1390 WINDY RIDGE CT
LONGWOOD, FL 327504501

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
REHMAN, DONALD D
19711 STATE RT 44
EUSTIS, FL 32736

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Donald I. Rehman* DONALD I. REHMAN 19 JAN 2005 (407)260-1985

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #