2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S49333

Name:

Address: City-St-Zip: RYAN, MICHELLE

842 MORNING VIEW CT

LAKELAND, FL 33813

Entity Name: WHITMAN ENTERPRISES, INC.

FILED Apr 29, 2009 Secretary of State

•		,			
Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
	IEMORIAL BI D, FL 33815	.VD.			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	IEMORIAL BI D, FL 33801	VD.			
FEI Number	: 59-3067775	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
The above	e of Florida.	US submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
	Electro	onic Signature of Registered A	gent	Date	
Election Car	mpaign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PT (WHITMAN, W 6104 CHRIST LAKELAND, F	INA DR W	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VS (WHITMAN, AN 6104 CHRIST LAKELAND, F	INA DR W	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	S (X) Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: WILLIAM WHITMAN PT 04/29/2009