2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V55042

Entity Name: WHIRLWIND ENTERPRISES, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1093 SHADY CAVE RD., EAST 1093 SHADY COVE ROAD, EAST

HAINES CITY, FL 33844 HAINES CITY, FL 33844

Current Mailing Address: New Mailing Address:

P.O. BOX 2809 1093 SHADY COVE ROAD, EAST

HAINES CITY, FL 33845 HAINES CITY, FL 33844

FEI Number: 59-3141006 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEELE, KATRINKA 1303 SHADY COVE ROAD, WEST HAINES CITY, FL 33844 US

STEELE, KATRINKA 1093 SHADY COVE ROAD, EAST HAINES CITY, FL 33844 US

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.

SIGNATURE: 04/21/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: STEELE, KATRINKA Name: STEELE, KATRINKA

 Address:
 PO BOX 2809
 Address:
 1093 SHADY COVE ROAD, EAST

 City-St-Zip:
 HAINES CITY, FL 33845
 City-St-Zip:
 HAINES CITY, FL 33844

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.

SIGNATURE: KATRINKA STEELE P 04/21/2009