

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000057102

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

**Entity Name:** WHIRLING DERVISH ENTERPRISES, INC.

**Current Principal Place of Business:**

18665 NW 146TH AVENUE  
WILLISTON, FL 32696 US

**New Principal Place of Business:**

**Current Mailing Address:**

18665 NW 146TH AVENUE  
WILLISTON, FL 32696 US

**New Mailing Address:**

**FEI Number:** 59-3260536

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAUMGARDNER, PATRICIA L  
18665 NW 146TH AVENUE  
WILLISTON, FL 32696 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BUGG, SHERWOOD L  
Address: 1600 OPEN RANGE ROAD  
City-St-Zip: CROSSVILLE, TN 38555

Title: VSTD  
Name: BUGG, PAT R  
Address: 1600 OPEN RANGE ROAD  
City-St-Zip: CROSSVILLE, TN 38555

I hereby 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 all other like empowered.

SIGNATURE: SHERWOOD L. BUGG

PD

04/12/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date