

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000099536

Entity Name: WHITE SANDS HEALTHCARE, INC

Current Principal Place of Business:

4452 SIENA CIRCLE
WELLINGTON, FL 33414

Current Mailing Address:

4452 SIENA CIRCLE
WELLINGTON, FL 33414 US

FEI Number: 82-3916446

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEGALINC CORPORATE SERVICES INC.
5237 SUMMERLIN COMMONS
SUITE 400
FORT MYERS, FL 33907 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title	DIR	Title	DIR
Name	SMITH, KRISTEN	Name	SMITH, CRAIG
Address	4452 SIENA CIRCLE	Address	4452 SIENA CIRCLE
City-State-Zip:	WELLINGTON FL 33414	City-State-Zip:	WELLINGTON FL 33414

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: CRAIG A. SMITH

CFO

04/02/2018

Electronic Signature of Signing Officer/Director Detail

Date