

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 165109

Entity Name: WHITE FORD CO. INC.

FILED
May 04, 2009
Secretary of State

Current Principal Place of Business:

916 N YOUNG BLVD
PO DRAWER 70
CHIEFLAND, FL 32626

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 70
CHIEFLAND, FL 32644

New Mailing Address:

FEI Number: 59-0712467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENNETT, NANCY WHITE
916 N YOUNG BLVD
CHIEFLAND, FL 32626 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDT () Delete
Name: WHITE, JUANITA M
Address: HWY US 19, NORTH
City-St-Zip: CHIEFLAND, FL 32626

Title: VDS () Delete
Name: BENNETT, NANCY WHITE
Address: 916 N YOUNG BLVD
City-St-Zip: CHIEFLAND, FL 32626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NANCY WHITE BENNETT

VDS

05/04/2009

Electronic Signature of Signing Officer or Director

Date