

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 385917

Entity Name: WHITE'S TACKLE SHOP, INC.

FILED
Aug 28, 2008
Secretary of State

Current Principal Place of Business:

521 N. SECOND STREET
FT PIERCE, FL 34950

New Principal Place of Business:

1597 S.W. HARBOUR ISLES CIRCLE
PORT ST. LUCIE, FL 34986

Current Mailing Address:

521 N. SECOND STREET
FT PIERCE, FL 34950

New Mailing Address:

1597 S.W. HARBOUR ISLES CIRCLE
PORT ST. LUCIE, FL 34986

FEI Number: 59-1355876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAFFENSBERGER, JOHNQ D II
521 N. SECOND STREET
FORT PIERCE, FL 34950 US

Name and Address of New Registered Agent:

RAFFENSBERGER, JOHN D II
1597 S.W. HARBOUR ISLES CIRCLE
PORT ST. LUCIE, FL 34986 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: JOHN D. RAFFENSBERGER, II

08/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RAFFENSBERGER, JOHN D II
Address: 521 N. SECOND STREET
City-St-Zip: FORT PIERCE, FL 34950

Title: VPSD () Delete
Name: RAFFENSBERGER, PATTI
Address: 521 N. SECOND STREET
City-St-Zip: FORT PIERCE, FL 34950

Title: S () Delete
Name: HARRELL, KATHY SECR.
Address: 741 SE HIDDEN RIVER DR.
City-St-Zip: PT. ST. LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RAFFENSBERGER, JOHN D II
Address: 1597 S.W. HARBOUR ISLES CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: VPTD (X) Change () Addition
Name: RAFFENSBERGER, PATTI
Address: 1597 S.W. HARBOUR ISLES CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34986

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: JOHN D. RAFFENSBERGER, II

PD

08/28/2008

Electronic Signature of Signing Officer or Director

Date