

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 649387

FILED
Feb 11, 2009
Secretary of State

Entity Name: WHITE SAND NURSERIES, INC.

Current Principal Place of Business:

P.O. BOX 871
PLYMOUTH, FL 32768

New Principal Place of Business:

602 HERMIT SMITH ROAD
APOPKA, FL 32703

Current Mailing Address:

P.O. BOX 871
PLYMOUTH, FL 32768

New Mailing Address:

FEI Number: 59-1955949 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELDMAN, H. JOHN
C/O CAUTHEN & FELDMAN P.A.
215 N JOANNA AVE
TAVARES, FL 32778 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 () Delete
Name: HOGSHEAD, RODNEY C III
Address: 603 SOUTH HERMIT SMITH RD
City-St-Zip: PLYMOUTH, FL 32768

Title: VP () Delete
Name: CURLEY, FRED
Address: 612 BURKE ST
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP () Delete
Name: MOORE, DAVID
Address: 1329 VILLA LANE
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: RODNEY C. HOGSHEAD, III

PD

02/11/2009

Electronic Signature of Signing Officer or Director

Date