


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90379 031 ***150.00

DOCUMENT # F03000003003

1. Entity Name
WHITE WAVE, INC.



Principal Place of Business
**2515 MCKINNEY AVENUE, SUITE 1200
 DALLAS, TX 75201**

Mailing Address
**2515 MCKINNEY AVENUE, SUITE 1200
 DALLAS, TX 75201**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country



03232004 Chg-P CR2E034 (10/03)

4. FEI Number
84-0808981

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent **7. Name and Address of New Registered Agent**

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
 Trust Fund Contribution **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** Delete
 NAME **ENGLES, GREGG L**
 STREET ADDRESS **2515 MCKINNEY AVENUE, SUITE 1200**
 CITY-ST-ZIP **DALLAS, TX 75201**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P** Delete
 NAME **DEMOS, STEVEN A**
 STREET ADDRESS **1990 N. 57TH COURT**
 CITY-ST-ZIP **BOULDER, CO 80301**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VAS** Delete
 NAME **TYSON, LISA N**
 STREET ADDRESS **2515 MCKINNEY AVENUE, SUITE 1200**
 CITY-ST-ZIP **DALLAS, TX 75201**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VS** Delete
 NAME **GOOLSBY, MICHELLE P**
 STREET ADDRESS **2515 MCKINNEY AVENUE, SUITE 1200**
 CITY-ST-ZIP **DALLAS, TX 75201**

TITLE **D/V/S** Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VT** Delete
 NAME **CALHOUN, PATRICIA**
 STREET ADDRESS **1990 N. 57TH COURT**
 CITY-ST-ZIP **BOULDER, CO 80301**

TITLE **SVP/CFO** Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **AS** Change Addition
 NAME **Angela B. Miro**
 STREET ADDRESS **2515 McKinney Ave, Ste 1200**
 CITY-ST-ZIP **Dallas, TX 75201**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Angela B. Miro **Angela B. Miro** **APR 12 2004** **214.303.3400**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #