2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G54975

Address:

City-St-Zip:

Entity Name: WILLISTON HOLDING COMPANY

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: % G. FRANK ETHERIDGE 342 E NOBLE AVE 342 E. NOBLE AVE WILLISTON, FL 32696 WILLISTON, FL 32696 **Current Mailing Address: New Mailing Address:** % G. FRANK ETHERIDGE PO BOX 788 WILLISTON, FL 32696 342 E. NOBLE AVE WILLISTON, FL 32696 FEI Number: 59-2419977 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ETHERIDGE, FRANK CEO 342 E. NOBLE AVE WILLISTON, FL 32696 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition WHITEHURST, DAN E Name: Name: 20551 NE 75TH ST Address: Address: City-St-Zip: WILLISTON, FL 32696 City-St-Zip: () Delete Title: PDC Title: () Change () Addition Name: ETHERIDGE, FRANK Name: 14471 NE 20TH ST. Address: Address: WILLISTON, FL 32696 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition CARLISLE, JANICE L. Name: Name: RT 4 BOX 685 HWY 41 S Address: Address: City-St-Zip: WILLISTON, FL City-St-Zip: Title: () Delete Title: CFO () Change (X) Addition BATTLE, TODD Name: Name:

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.

Address:

City-St-Zip:

18890 NE 55TH ST

WILLISTON, FL 32696

SIGNATURE: TODD BATTLE CFO 01/14/2009