2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2011
Secretary of State

DOCUMENT# J16121

Entity Name: WHITE CITY GROVE, INC.

Current Principal Place of Business:

6043 TRAVELERS WAY
FORT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 613
FORT PIERCE, FL 34954

New Mailing Address:

P.O. BOX 613
FORT PIERCE, FL 349540613

FEI Number: 59-2746183 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASSENS-AXX, NORMA F
6043 TRAVELERS WAY
FORT PIERCE, FL 34982 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

OFFICERS AND DIRECTORS:

Title: PRS
Name: CASSENS-AXX, NORMA F
Address: 6043 TRAVELERS WAY
City-St-Zip: FORT PIERCE, FL 34982

Title: VD
Name: DIXON, W. BRUCE JR.
Address: 1998 SHINN ROAD
City-St-Zip: FORT PIERCE, FL 34945

Title: S
Name: DIXON, CATHERINE C
Address: 1998 SHINN ROAD
City-St-Zip: FORT PIERCE, FL 34945

I hereby 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 all other like empowered.

SIGNATURE: NORMA CASSENS AXX PRES 04/04/2011

Electronic Signature of Signing Officer or Director Date