## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000032121

Entity Name: WHITE DOG, INC.

FILED Aug 02, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

618 N WILD OLIVE AVE 574 HOOK HILL ROAD DAYTONA BCH, FL 32118 LURAY, VA 22835 US

Current Mailing Address: New Mailing Address:

618 N WILD OLIVE AVE P. O. BOX 745
DAYTONA BCH, FL 32118 P. O. BOX 745
LURAY, VA 22835 US

FEI Number: 90-0023083 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:

WELLS, SYLVAN A CONLEY, DENNIS
618 N WILD OLIVE AVE 618 NORTH WILD OLIVE AVENUE
DAYTONA BCH, FL 32118 DAYTONA BEACH, FL 32118 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: DENNIS CONLEY 08/02/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: WELLS, SYLVAN A Name: WELLS, SYLVAN A

 Address:
 618 N WILD OLIVE AVE
 Address:
 574 HOOK HILL ROAD

 City-St-Zip:
 DAYTONA BCH, FL 32118
 City-St-Zip:
 LURAY, VA 22835 US

Title: D () Delete Title: D (X) Change () Addition

Name:WELLS, SALLY AName:WELLS, SALLY AAddress:618 N WILD OLIVE AVEAddress:574 HOOK HILL ROADCity-St-Zip:DAYTONA BCH, FL 32118City-St-Zip:LURAY, VA 22835 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SYLVAN A. WELLS PRES 08/02/2004