

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000053814

FILED
Apr 23, 2008
Secretary of State

Entity Name: WHITE/BRANDON CORPORATION

Current Principal Place of Business:

6600 - 49TH STREET N
PINELLAS PARK, FL 33781

New Principal Place of Business:

5957 BAYVIEW CIRCLE SOUTH
GULFPORT, FL 33707

Current Mailing Address:

6600 - 49TH STREET N
PINELLAS PARK, FL 33781

New Mailing Address:

5957 BAYVIEW CIRCLE SOUTH
GULFPORT, FL 33707

FEI Number: 71-0888324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LECOMPTE, MORRIS A
800 2ND AVENUE SOUTH
380
ST. PETERSBURG, FL 33701 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: D,VP () Delete
Name: WHITE, MEGAN
Address: 10750 SPRING ST.
City-St-Zip: LARGO, FL 33774

Title: DPST () Delete
Name: WHITE, JOSEPH C
Address: 10750 SPRING ST.
City-St-Zip: LARGO, FL 33774

Title: D,VP (X) Delete
Name: WHITE, JO ANN
Address: 10750 SPRING ST.
City-St-Zip: LARGO, FL 33774

Title: D,VP (X) Delete
Name: CARLAN, LAUREN
Address: 5957 BAYVIEW CIRCLE S
City-St-Zip: GULFPORT, FL 33707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change () Addition
Name: WHITE, MEGAN L
Address: 1912 GULF BLVD. UNIT 301
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: VSTD (X) Change () Addition
Name: CARLAN, LAUREN
Address: 5957 BAYVIEW CIRCLE SOUTH
City-St-Zip: GULFPORT, FL 33707

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: MEGAN L. WHITE

VSTD

04/23/2008

Electronic Signature of Signing Officer or Director

Date