

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000095566

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: WHITE GATOR PRODUCTIONS, INC.

## Current Principal Place of Business:

1526 COUNTY ROAD #731  
VENICE, FL 33960

## New Principal Place of Business:

## Current Mailing Address:

1526 COUNTY ROAD #731  
VENICE, FL 33960

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HEFLICK, SHAWN  
1159 MALABAR ROAD  
PALM BAY, FL 32907 US

## Name and Address of New Registered Agent:

HEFLICK, SHAWN  
2930 TOULON RD  
PALM BAY, FL 32909 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: SHAWN HEFLICK

03/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: HEFLICK, SHAWN  
Address: 1159 MALABAR ROAD  
City-St-Zip: PALM BAY, FL 32907

Title: DT ( ) Delete  
Name: GRAZIANI, GREG  
Address: 1526 COUNTY ROAD #731  
City-St-Zip: VENICE, FL 33960

Title: DS ( ) Delete  
Name: HEFLICK, JENNIFER  
Address: 1159 MALABAR ROAD  
City-St-Zip: PALM BAY, FL 32907

Title: DV ( ) Delete  
Name: GRAZIANI, JAQUELYN  
Address: 1526 COUNTY ROAD #731  
City-St-Zip: VENICE, FL 33960

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: HEFLICK, SHAWN  
Address: 2930 TOULON RD  
City-St-Zip: PALM BAY, FL 32909

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DS (X) Change ( ) Addition  
Name: HEFLICK, JENNIFER  
Address: 2930 TOULON RD  
City-St-Zip: PALM BAY, FL 32909

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: SHAWN HEFLICK

PRES

03/10/2009

Electronic Signature of Signing Officer or Director

Date