

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000084459

Entity Name: WHITE REALTY COMPANY

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

2635 MILLBROOK RD
RALEIGH, NC 27604

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 26006
RALEIGH, NC 27611

New Mailing Address:

FEI Number: 59-3215746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
TALLAHASSEE, FL 32301 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: PD () Delete
Name: SLOAN III, O. TEMPLE
Address: 2635 MILLBROOK ROAD
City-St-Zip: RALEIGH, NC 27604

Title: VP (X) Delete
Name: GARDNER, JOHN W
Address: 2635 MILLBROOK RD.
City-St-Zip: RALEIGH, NC 27604

Title: AS (X) Delete
Name: FELMAN, JAMES S
Address: 2635 MILLBROOK RD
City-St-Zip: RALEIGH, NC 27604

Title: S (X) Delete
Name: WICKER, ROBERT
Address: 2635 MILLBROOK RD
City-St-Zip: RALEIGH, NC 27604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: HINES, THOMAS B
Address: 2635 MILLBROOK ROAD
City-St-Zip: RALEIGH, NC 27604

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

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: THOMAS B. HINES

VP

04/17/2009

Electronic Signature of Signing Officer or Director

Date