

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000003846

1. Entity Name
WHITE OAK PROPERTIES, INC.



Principal Place of Business

8494 NAVARRE PKWY
NAVARRE, FL 32566

Mailing Address

8494 NAVARRE PKWY
NAVARRE, FL 32566

DO NOT WRITE IN THIS SPACE



04042006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3307111
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOROWSKI, T. A. JR
25 WEST CEDAR STREET
STE 304
PENSACOLA, FL 32501

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
PULLUM, WILLIAM A
8494 NAVARRE PARKWAY
NAVARRE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
ERSOFF, STANLEY
1439 WEST FLAGLER ST
MIAMI, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
PULLUM, BETTY JEAN
2160 HWY 87
NAVARRE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
PRICE, REBECCA L
8494 NAVARRE PKWY
NAVARRE, FL 32566

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
BOROWSKI, T.A. JR
25 WEST CEDAR ST STE 304
PENSACOLA, FL 32501

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000510625
04/29/06-80014-018 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William A. Pullum, Pres. 4/7/06 850/939-2363

Date

Daytime Phone #