

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000100473

Entity Name: PATRICIA T. WHITE, P.A.

FILED
Jan 18, 2006
Secretary of State

Current Principal Place of Business:

35906 LAKE UNITY NURSERY ROAD
FRUITLAND PARK, FL 34731

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 490818
LEESBURG, FL 347490818

New Mailing Address:

35906 LAKE UNITY NURSERY ROAD
FRUITLAND PARK, FL 34731

FEI Number: 59-3415602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

WHITE, PATRICIA T PSTD
35906 LAKE UNITY NURSERY ROAD
FRUITLAND PARK, FL 34731 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: PATRICIA T. WHITE

01/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: WHITE, PATRICIA T
Address: 343 ALMERIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: WHITE, PATRICIA T
Address: 35906 LAKE UNITY NURSERY ROAD
City-St-Zip: FRUITLAND PARK, FL 34731

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA T. WHITE

PSTD

01/18/2006

Electronic Signature of Signing Officer or Director

Date