

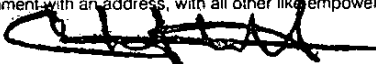


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2008 8:00 am**  
**Secretary of State**

05-05-2008 90253 006 \*\*\*550.00

<b>DOCUMENT # P97000084975</b> 1. Entity Name <b>CHRISTOPHER A. WHITE, P.A.</b>					
Principal Place of Business <b>105 SOLANA RD</b> <b>C</b> <b>PONTE VEDRA BEACH, FL 32082</b>			Mailing Address <b>105 SOLANA RD</b> <b>C</b> <b>PONTE VEDRA BEACH, FL 32082</b>		
2. Principal Place of Business - No P.O. Box # <b>240 Ponte Vedra Park Drive</b>		3. Mailing Address <b>Same as #2</b>			
Suite, Apt. #, etc. <b>Suite 150</b>		Suite, Apt. #, etc. <input checked="" type="checkbox"/>			
City & State <b>Ponte Vedra Beach</b>		City & State <input checked="" type="checkbox"/>			
Zip <b>32082</b>	Country <b>USA</b>	Zip <input checked="" type="checkbox"/>	Country <input checked="" type="checkbox"/>	4. FEI Number <b>59-2868923</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>WHITE, CHRISTOPHER A</b> <b>105 SOLANA RD</b> <b>STE C</b> <b>PONTE VEDRA BEACH, FL 32082</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) <b>240 Ponte Vedra Park Drive</b> <b>Suite 150</b> City <b>Ponte Vedra Beach</b> <b>FL</b> Zip Code <b>32082</b>		
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 		christopher A. White		4/24/05	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>WHITE, CHRISTOPHER A</b> <b>105 SOLANA RD., STE C</b> <b>PONTE VEDRA BEACH, FL 32082</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>240 Ponte Vedra Park Drive</b> <b>Suite 150</b> <b>Ponte Vedra Beach, FL 32082</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 of 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: 		Christopher A. White		4/24/08 904/567-1060	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Director		Date Daytime Phone #	