

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 8:00 am
Secretary of State

01-11-2008 90061 002 ***150.00

DOCUMENT # S23964 1. Entity Name WHITE'S CONSULTING GROUP, INC.			
Principal Place of Business 3930 CYPRESS LANDING N WINTER HAVEN, FL 33884 US		Mailing Address 3930 CYPRESS LANDING N WINTER HAVEN, FL 33884 US	
2. Principal Place of Business - No P.O. Box # 1225 HAVENDALE BLVD. NW, APT. 163 Suite, Apt. #, etc.		3. Mailing Address 1225 HAVENDALE BLVD NW Suite, Apt. #, etc.	
City & State WINTER HAVEN		City & State WINTER HAVEN	
Zip 33881		Zip 33881	
Country USA		Country USA	
6. Name and Address of Current Registered Agent WHITE, HARRY E. 3930 CYPRESS LANDING N WINTER HAVEN, FL 33884 33881		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WHITE, HARRY E. 3930 CYPRESS LANDING N WINTER HAVEN, FL 33884	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1225 HAVENDALE BLVD. NW, ART 163 33881
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST WHITE, KARRIE J. 3930 CYPRESS LANDING N WINTER HAVEN, FL 33884	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1225 HAVENDALE BLVD, NW, ART. 163 33881
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP WHITE, DAVID E. 1295 E GEORGIA ST BARTOW, FL 33830	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete ☐	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete ☐	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete ☐	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ 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 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: <u>HARRY E. WHITE</u> HARRY E. WHITE		1-08-08 863-324-4659 Date Daytime Phone #	