2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#738139

Entity Name: SOUTHERN LEGAL COUNSEL, INC.

FILED Mar 04, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1229 NW 12TH AVENUE GAINESVILLE, FL 326014113 US

Current Mailing Address: New Mailing Address:

1229 NW 12TH AVENUE GAINESVILLE, FL 326014113 US

FEI Number: 59-1726382 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NELSON, ALICE K SIEGEL, JODI 1229 NW 12TH AVENUE 1229 NW 12TH AVENUE

GAINESVILLE, FL 32601 US GAINESVILLE, FL 32601 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: JODI SIEGEL 03/04/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition ALLEE, JACQUELINE SIEGEL, JODI Name: Name:

4501 SANTA MARIA ST Address: 1229 NW 12TH AVENUE Address: City-St-Zip: CORAL GABLES, FL 33146 US City-St-Zip: GAINESVILLE, FL 32601 US

Title: () Delete Title: (X) Change () Addition NELSON, ALICE K Name: SLEASMAN, PETER P Name:

Address: 1229 NW 12TH AVENUE Address: 1229 NW 12TH AVENUE City-St-Zip: GAINESVILLE, FL 32601 US City-St-Zip: GAINESVILLE, FL 32601 US

Title: () Delete Title: (X) Change () Addition

SUBIN, ELI HAROLD GILBERT, RICHARD A Name: Name:

200 SOUTH ORANGE AVE., STE 2600 101 E. KENNEDY BLVD., STE. 3400 Address: Address: City-St-Zip: ORLANDO, FL 32801 US City-St-Zip: TAMPA, FL 33602 US

Title: () Delete Title: (X) Change () Addition Name: COKER, HOWARD C Name: BOOKMAN, ALAN B

30 SOUTH SPRING STREET Address: PO BOX 1860 Address: City-St-Zip: JACKSONVILLE, FL 32201 US City-St-Zip: PENSACOLA, FL 32501 US

Title: () Delete Title: (X) Change () Addition GILBERT, RICHARD A COKER, HOWARD C Name: Name:

201 N FRANKLIN ST STE 3900 136 EAST BAY STREET Address: Address: City-St-Zip: TAMPA, FL 33602 US City-St-Zip: JACKSONVILLE, FL 32201 US

Title: () Delete Title: (X) Change () Addition HATCHETT, JOSEPH W HON. HATCHETT, JOSEPH W HON. Name: Name:

Address: P.O. BOX 10555 Address: 106 EAST COLLEGE AVENUE, STE 1200

TALLAHASSEE, FL 32302 US TALLAHASSEE, FL 32302 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JODI SIEGEL PT 03/04/2005