

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770969

FILED
Feb 12, 2008
Secretary of State

Entity Name: LAMBDA SOUTH, INC.

Current Principal Place of Business:

1231-A EAST LOS OLAS BLVD.
FT. LAUDERDALE, FL 33303

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 030339
FT. LAUDERDALE, FL 333030339

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WOODRUFF, MARK
215 N VICTORIA PARK ROAD
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

CLEMENTS, WILLIAM R
4670 NE 4TH AVE
OAKLAND PARK, FL 33334 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: WILLIAM CLEMENTS

02/12/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WYNN, BILL
Address: 2206 S.CYPRESS BEND DR. #707
City-St-Zip: POMPANO BEACH, FL 33069

Title: TD () Delete
Name: CULLEN, GEORGE F
Address: 2700 S. OAKLAND FOREST DR #404
City-St-Zip: OAKLAND PARK, FL 33309

Title: S () Delete
Name: SCHENK, DAVID
Address: 1419 NE 4 PLACE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP () Delete
Name: CLEMENTS, WILLIAM
Address: 4670 NE 4 AVE
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLEMENTS, WILLIAM R
Address: 4670 NE 4TH AVE
City-St-Zip: OAKLAND PARK, FL 33334

Title: TD (X) Change () Addition
Name: CICCONE, BOB
Address: 321 SW 22ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: KNAPP, JOE
Address: P.O. BOX 2307
City-St-Zip: FORT LAUDERDALE, FL 33303

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM CLEMENTS

P

02/12/2008

Electronic Signature of Signing Officer or Director

Date