

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 09, 2006  
Secretary of State**

DOCUMENT# L04270

Entity Name: SOUTHARC, INC.

**Current Principal Place of Business:**

3700 NW 91ST ST  
STE D300  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

3700 NW 91ST ST  
STE D300  
GAINESVILLE, FL 32606

**New Mailing Address:**

FEI Number: 59-2957583      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DICKINSON, MARTIN F.  
5600 S.W. 32ND AVENUE  
GAINESVILLE, FL 32608      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DICKINSON, LONNA S.  
Address: 5600 SW 32ND AVE.  
City-St-Zip: GAINESVILLE, FL

Title: D ( ) Delete  
Name: WAYNE, MARTIN J.  
Address: 5426 NW 32ND ST.  
City-St-Zip: GAINESVILLE, FL

Title: VSTC ( ) Delete  
Name: WAYNE, LUCY B.  
Address: 5426 NW 32ND ST  
City-St-Zip: GAINESVILLE, FL

Title: PD ( ) Delete  
Name: DICKINSON, MARTIN F.  
Address: 5600 SW 32ND AVE  
City-St-Zip: GAINESVILLE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: LUCY B. WAYNE, PH.D., RPA

VSTC

02/09/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date