

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000002245

**FILED**  
**Mar 29, 2016**  
**Secretary of State**  
**CC5072215977**

**Entity Name:** SOUTHERN FISHING CHARITIES INC.

**Current Principal Place of Business:**

631 WESTWIND DR  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

631 WESTWIND DR  
NORTH PALM BEACH, FL 33408

**FEI Number:** 47-3331785

**Certificate of Status Desired:** No

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

LEGALINC CORPORATE SERVICES, INC.  
5237 SUMMERLIN COMMONS  
SUITE 400  
FORT MYERS, FL 33907 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            D  
Name            JACKSON, JOHN  
Address        631 WESTWIND DR  
City-State-Zip: NORTH PALM BEACH FL 33408

Title            D  
Name            PORTIER, GRANT  
Address        187 SULKY WAY  
City-State-Zip: WELLINGTON FL 33414

Title            D  
Name            MITCHELL, JOHN  
Address        5547 55TH AVET  
City-State-Zip: VERO BEACH FL 32967

*I hereby 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 all other like empowered.*

**SIGNATURE:** JOHN C JACKSON

**MGR**

**03/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date