

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 548245

**Entity Name:** SOUTHERN MONUMENT STUDIO, INC.

**Current Principal Place of Business:**

404 N BOULEVARD EAST  
LEESBURG, FL 34748

**Current Mailing Address:**

404 N BOULEVARD EAST  
LEESBURG, FL 34748

**FEI Number:** 59-1771030

**Certificate of Status Desired:** No

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

HUNT, ASHLEY  
601 S. 9TH STREET  
LEESBURG, FL 34748 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 PD  
Name STEPHENSON, BRYAN E  
Address 404 N BOULEVARD EAST  
City-State-Zip: LEESBURG FL 34748

Title S  
Name YASBECK, EMILY S.  
Address 404 N. BOULEVARD EAST  
City-State-Zip: LEESBURG FL

Title VD  
Name STEPHENSON, BILLY  
Address 404 N BOULEVARD EAST  
City-State-Zip: LEESBURG FL 34748

Title T  
Name STEPHENSON, MARY SUE  
Address 404 N. BOULEVARD EAST  
City-State-Zip: LEESBURG FL

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** EMILY S. YASBECK

**SECRETARY**

**03/13/2015**

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

\_\_\_\_\_  
Date