

2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P11000094003

Entity Name: SOUTHERN STATES PAVEMENT MARKINGS, INC.**Current Principal Place of Business:**305 PORPOISE POINT DR.
SAINT AUGUSTINE, FL 32084**Current Mailing Address:**305 PORPOISE POINT DR.
SAINT AUGUSTINE, FL 32084**FEI Number:** 45-3689782**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARTER, SHERAN L
305 PORPOISE POINT DR.
SAINT AUGUSTINE, FL 32084 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	PRESIDENT
Name	CARTER, KEVIN A
Address	2708 LOYJA STREET
City-State-Zip:	SAINT AUGUSTINE FL 32084

Title	VP
Name	CARTER, SHERAN L
Address	305 PORPOISE POINT DR.
City-State-Zip:	SAINT AUGUSTINE FL 32084

Title	VP
Name	CARTER, DARREN A
Address	2601 SENECA DRIVE
City-State-Zip:	SAINT JOHNS FL 32259

Title	VP
Name	ROMAN, JESUS E
Address	160 SOUTHERN GROVE DR
City-State-Zip:	SAINT JOHNS FL 32259

Title	VP
Name	CARTER, MELVIN O
Address	305 PORPOISE POINT DRIVE
City-State-Zip:	ST AUGUSTINE FL 32084

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: JESUS E ROMAN

VP

07/23/2014

Electronic Signature of Signing Officer/Director Detail_____
Date