

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 124910

Entity Name: REMSOUTH, INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

6950 PHILIPS HWY., SUITE 35
JACKSONVILLE, FL 32216

New Principal Place of Business:

6141 PHILIPS HIGHWAY
JACKSONVILLE, FL 32216

Current Mailing Address:

P.O. BOX 550829
JACKSONVILLE, FL 322550829

New Mailing Address:

FEI Number: 59-0135280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKERSON, JAMES R JR
6950 PHILLIPS HIGHWAY, SUITE 35
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

WILKERSON, JAMES R JR
6141 PHILIPS HIGHWAY
JACKSONVILLE, FL 32216 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:

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CVD () Delete
Name: COVINGTON, BARRY W
Address: 6950 PHILIPS HWY., SUITE 35
City-St-Zip: JACKSONVILLE, FL 32216

Title: PD () Delete
Name: WILKERSON JR, JAMES R
Address: 6950 PHILIPS HWY., SUITE 35
City-St-Zip: JACKSONVILLE, FL 32216

Title: D () Delete
Name: BLAIR, JANICE S
Address: 6950 PHILIPS HWY., SUITE 35
City-St-Zip: JACKSONVILLE, FL 32216

Title: ST () Delete
Name: WILKERSON, NANCY C
Address: 6950 PHILIPS HWY., SUITE 35
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CVD (X) Change () Addition
Name: COVINGTON, BARRY W
Address: 6141 PHILIPS HIGHWAY
City-St-Zip: JACKSONVILLE, FL 32216

Title: PD (X) Change () Addition
Name: WILKERSON, JAMES R JR
Address: 6141 PHILIPS HIGHWAY
City-St-Zip: JACKSONVILLE, FL 32216

Title: SD (X) Change () Addition
Name: WILKERSON, NANCY C
Address: 6141 PHILIPS HIGHWAY
City-St-Zip: JACKSONVILLE, FL 32216

Title: T (X) Change () Addition
Name: COVINGTON, CYNTHIA W
Address: 6141 PHILIPS HIGHWAY
City-St-Zip: JACKSONVILLE, FL 32216

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

SIGNATURE: NANCY C. WILKERSON

S

04/21/2009

Electronic Signature of Signing Officer or Director

Date