

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 06, 1999 8:00 am  
Secretary of State

05-06-1999 90292 020 \*\*\*750.00

DOCUMENT # 149746

1. Corporation Name

SOUTHERN INDUSTRIAL CORPORATION

Principal Place of Business

9009 REGENCY SQUARE BLVD.  
P.O. DRAWER U  
JACKSONVILLE FL 32203

Mailing Address

9009 REGENCY SQUARE BLVD.  
P.O. DRAWER U  
JACKSONVILLE FL 32203

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/08/1947

4. FEI Number

59-0565452

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

STEIN, DAVID  
9009 REGENCY SQUARE BLVD  
JACKSONVILLE FL 32225

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD ☐ DELETE

NAME STEIN, ROBERT  
STREET ADDRESS 9009 REGENCY SQ. BLVD.  
CITY-ST-ZIP JACKSONVILLE FL 32211

TITLE VD ☐ DELETE

NAME STEIN, RICHARD  
STREET ADDRESS 9009 REGENCY SQUARE BLVD  
CITY-ST-ZIP JACKSONVILLE FL

TITLE PD ☐ DELETE

NAME STEIN, DAVID  
STREET ADDRESS 9009 REGENCY SQUARE BLVD  
CITY-ST-ZIP JACKSONVILLE FL

TITLE EVP ☐ DELETE

NAME HICKS, EDWARD F.  
STREET ADDRESS 9009 REGENCY SQUARE BLVD  
CITY-ST-ZIP JACKSONVILLE FL

TITLE ST ☐ DELETE

NAME CARLSON, MARC  
STREET ADDRESS 9009 REGENCY SQ. BLVD.  
CITY-ST-ZIP JACKSONVILLE FL

TITLE VD ☐ DELETE

NAME STEIN, MARTIN E  
STREET ADDRESS 9009 REGENCY SQ BLVD  
CITY-ST-ZIP JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Vice President ☐ Change ☒ Addition

1.2 NAME Beverly Jelinek  
1.3 STREET ADDRESS 9009 Regency Square Blvd  
1.4 CITY-ST-ZIP Jacksonville, FL 32211

2.1 TITLE Vice President ☐ Change ☒ Addition

2.2 NAME Jimmy Harms  
2.3 STREET ADDRESS 9009 Regency Square Blvd.  
2.4 CITY-ST-ZIP Jacksonville, FL 32211

3.1 TITLE Secretary ☐ Change ☒ Addition

3.2 NAME Ann E. Sikes  
3.3 STREET ADDRESS 9009 Regency Square Blvd  
3.4 CITY-ST-ZIP Jacksonville, FL 32211

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/99

Date

904-725-4122

Daytime Phone #

CR2E034 (1/198)

0045080