

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 639905

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: SOUTHERN LATCH MANUFACTURERS, INC.

## Current Principal Place of Business:

6100 US 1 N  
BLDG F  
ST AUGUSTINE, FL 32095

## New Principal Place of Business:

124 BINNINGER DRIVE  
ST AUGUSTINE, FL 32095

## Current Mailing Address:

6100 US 1 N  
BLDG F  
ST AUGUSTINE, FL 32095

## New Mailing Address:

124 BINNINGER DRIVE  
ST AUGUSTINE, FL 32095

FEI Number: 59-1976661

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COX, SALLY  
6100 U.S. 1 NORTH , BLDG. F  
SAINT AUGUSTINE, FL 32095 US

## Name and Address of New Registered Agent:

COX, SALLY  
124 BINNINGER DRIVE  
SAINT AUGUSTINE, FL 32095 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:

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: COX, RANDALL J,  
Address: 100 RIVER LANDING DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32095

Title: STD ( ) Delete  
Name: COX, MICHAEL R,  
Address: 241 REDFISH CREEK DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32095

Title: PD ( ) Delete  
Name: COLEE, SALLY COX  
Address: 2870 LEWIS SPEEDWAY  
City-St-Zip: SAINT AUGUSTINE, FL 32084

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition  
Name: COX, RANDALL J SR  
Address: 100 RIVER LANDING DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32095

Title: STD (X) Change ( ) Addition  
Name: COX, MICHAEL R  
Address: 241 REDFISH CREEK DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32095

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RANDALL J. COX, SR.

VP

01/21/2009

Electronic Signature of Signing Officer or Director

Date