2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 693950

FILED Feb 03, 2009 Secretary of State

Entity Name: SOUTHERN INDEPENDENT TESTING AGENCY, INC.

Current Principal Place of Business: New Principal Place of Business: 138 A WHITAKER ROAD LUTZ, FL 33549 **Current Mailing Address: New Mailing Address:** 138 A WHITAKER ROAD LUTZ, FL 33549 FEI Number: 59-2099805 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KEEL, C.J., JR. 4950 W. KÉNNEDY BLVD., SUITE 603 TAMPA, FL 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition KAUPP, CHARLES W JR. KAUPP, CHARLES W JR, Name: Name: 502 CULLEN COURT 17319 LINDA VISTA CIRCLE Address: Address: City-St-Zip: LUTZ, FL City-St-Zip: LUTZ, FL 33548 Title: STD Title: STD () Delete (X) Change () Addition Name: KAUPP, LINDA. Name: KAUPP, LINDA, **502 CULLEN COURT** 17319 LINDA VISTA CIRCLE Address: Address: LUTZ, FL 33548 City-St-Zip: City-St-Zip: LUTZ. FL Title: Title: VΡ () Delete () Change () Addition KAUPP, BRIAN C Name: Name: 6307 SONGBIRD WAY Address: Address: City-St-Zip: TAMPA, FL 33625 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition TRUSTY, STEVE Name: Name: Address: 1705 BLIND POND AVE. Address: City-St-Zip: LUTZ, FL 33549 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: LINDA M. KAUPP STD 02/03/2009