2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002718

City-St-Zip:

Entity Name: SOUTHERN STYLE MANAGEMENT, INC.

FILED Apr 29, 2009 Secretary of State

Littly Na	iiie. 3001111	LRN STILL WANAGEWENT,	INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
	TH DONNEL ORA, FL 327						
Current M	lailing Addre	ss:	New Maili	New Mailing Address:			
P.O. BOX 337 EUSTIS, FL 327261061				P.O. BOX 337 EUSTIS, FL 32756			
FEI Number	: 45-0534188	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and	l Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
	, LINDA V TH DONNEL ORA, FL 327						
	named entity e of Florida.	submits this statement for the	purpose of changing	its registered of	ice or registered agent, or bot	:h,	
SIGNATU	RE:						
	Electro	nic Signature of Registered A	gent		Date	_	
Election Car	mpaign Financir	ng Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	HUNTLEY, DO	VOOD CIRCLE	Title: Name: Address: City-St-Zip:	P (X) LAWSON, DONA 37021 FORESTI EUSTIS, FL 327	DEL DRIVE		
Title: Name: Address: City-St-Zip:	S (HUNTLEY, DO 36347 GLENV EUSTIS, FL 3	VOOD CIR.	Title: Name: Address: City-St-Zip:	()(Change () Addition		
Title: Name: Address: City-St-Zip:	T (HUNTLEY, LIN 36347 GLENV EUSTIS, FL 3	VOOD CIR.	Title: Name: Address: City-St-Zip:	()(Change () Addition		
Title: Name: Address:	() Delete	Title: Name: Address:	D () (LAWSON, VIVIAI 37021 FORESTI			

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.

City-St-Zip:

EUSTIS, FL 32736

SIGNATURE: LINDA V HUNTLEY T 04/29/2009