2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004959

Entity Name: MIDSOUTH FINANCIAL MANAGEMENT, INC.

FILED Mar 12, 2008 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	ST 23RD STRI CITY, FL 3240				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	ST 23RD STRE CITY, FL 3240				
FEI Number	: 20-3176016	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	s of New Registered Agent:	
1418 WES	RY, GLORIA ST 23RD STRI CITY, FL 3240				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD (SANDERS, H. 2526 WEST M DOTHAN, AL	IAIN STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C (MALONE, W. I 112 WEST TR DOTHAN, AL	OY STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (JERNIGAN, IV 2526 WEST M DOTHAN, AL	IAIN ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MALONE, ALY	CES FERRY RD., NE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (WILSON, CAT 1040 OLDE TO WOODSTOCK	DWNE LAND	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: IVY JERNIGAN S 03/12/2008