2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007455

Title:

Name:

Address:

City-St-Zip:

Entity Name: SOUTHWIND GROUP, INC

FILED Feb 20, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 910 PETROLEUM DRIVE ABILENE, TX 79602 **Current Mailing Address: New Mailing Address:** 910 PETROLEUM DRIVE ABILENE, TX 79602 FEI Number: 75-2640367 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DR. SUITE 4 WESTON, FL 33331 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 () Change () Addition CUTBIRTH, SAM Name: Name: 1410 WOODLAND TR Address: Address: City-St-Zip: ABILENE, TX 79605 City-St-Zip: Title: Title: () Change () Addition ST () Delete Name: BEALL, JASON Name: Address: Address: 200 CR 498 GOLDSBORO, TX 79519 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition VC VC EDWARDS, DALE EDWARDS, DALE Name: Name: 1609 ELMWOOD DR. 4402 LA HACIENDA Address: Address: City-St-Zip: ABILENE, TX 79605 City-St-Zip: ABILENE, TX 79602

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JASON BEALL ST 02/20/2008

() Delete

EDWARDS, ROSEMARY

1609 ELMWOOD DR.

ABILENE, TX 79605

(X) Change () Addition

EDWARDS, ROSEMARY

4402 LA HACIENDA

ABILENE, TX 79602