

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005446

FILED
Jul 14, 2008
Secretary of State

Entity Name: ATLANTIC SOUTHERN FINANCIAL GROUP, INC.

Current Principal Place of Business:

13474 ATLANTIC BLVD.
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 27150
MACON, GA 31210

New Mailing Address:

FEI Number: 20-2118147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, GARY P
13474 ATLANTIC BLVD.
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEVENS, MARK A
Address: 405 WAVERLY LANE
City-St-Zip: MACON, GA 31210

Title: V () Delete
Name: HALL, GARY P
Address: 717 ALLISON PARK
City-St-Zip: MACON, GA 3210

Title: D () Delete
Name: LIPFORD, J. RUSSELL JR.
Address: 3212 AVANT PL.
City-St-Zip: MACON, GA 31216

Title: S () Delete
Name: SOTO, CAROL W
Address: 4653 S. STRATFORD OAKS DR.
City-St-Zip: MACON, GA 31210

Title: T () Delete
Name: DRIVER, MARK S
Address: 104 TURNBERRY PARK
City-St-Zip: MACON, GA 31210

Title: D () Delete
Name: RYALS, TJ
Address: 158 WEATHERBY DR.
City-St-Zip: MACON, GA 31210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: CAROL W SOTO

CFO

07/14/2008

Electronic Signature of Signing Officer or Director

Date