

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16567

FILED
Jun 24, 2009
Secretary of State

Entity Name: SOUTH FLORIDA CEILING SYSTEMS, INC.

Current Principal Place of Business:

201 NW 127TH AVE.
PLANTATION FL, 33325

New Principal Place of Business:

201 NW 127TH AVE.
PLANTATION, FL 33325

Current Mailing Address:

6550 NO FEDERAL HWY #240
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 59-2129365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAMBLISS, JOE A
201 NW 127TH AVE.
PLANTATION FL, FL 33325 US

Name and Address of New Registered Agent:

CHAMBLISS, JOE A
201 NW 127TH AVE.
PLANTATION, FL 33325 US

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:

06/24/2009

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: STD () Delete
Name: CHAMBLISS, GERALDINE M.
Address: 201 NW 127TH AVE.
City-St-Zip: PLANTATION, FL

Title: PD (X) Delete
Name: CHAMBLISS, JOE A
Address: 201 NW 127TH AVE.
City-St-Zip: PLANTATION, FL

Title: VPD (X) Delete
Name: CHAMBLISS, HUNTER W
Address: 1202 SE 11 COURT
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: VPD (X) Delete
Name: MYERS, PAIGE M
Address: 241 CARMEL DRIVE E
City-St-Zip: MOBILE, AL 36608

Title: VPD (X) Delete
Name: MARKS, KIMBERLY M
Address: 3534 DUMBARTON ROAD
City-St-Zip: ATLANTA, GA 30327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: CHAMBLISS, GERALDINE M.
Address: 201 NW 127TH AVE.
City-St-Zip: PLANTATION, FL 33325

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: GERALDINE CHAMBLISS

STD

06/24/2009

Electronic Signature of Signing Officer or Director

Date