


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90169 003 ***150.00

DOCUMENT # F57942
 1. Entity Name
OPUS SOUTH CORPORATION



60032724



04212008 Chg-P CR2E034 (12/06)

Principal Place of Business
4200 W. CYPRESS STREET
SUITE 444
TAMPA, FL 33-3607

Mailing Address
4200 W. CYPRESS STREET
SUITE 444
TAMPA, FL 33-3607

2. Principal Place of Business - No P.O. Box #
 3. Mailing Address

Suite, Apt. #, etc.
 Suite, Apt. #, etc.

City & State
 City & State

Zip
 Country
 Zip
 Country

4. FEI Number
58-1454928
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VTS** Delete
 NAME **GREENFIELD, BARRY W**
 STREET ADDRESS **4200 W. CYPRESS ST. #444**
 CITY-ST-ZIP **TAMPA, FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DP** Delete
 NAME **RAUENHORST, JOSEPH**
 STREET ADDRESS **225 NE MIZNER BLVD. #675**
 CITY-ST-ZIP **BOCA RATON, FL 33432**

TITLE **President & CEO** Change Addition
 NAME **Hunter Barrier**
 STREET ADDRESS **925 North Point Parkway # 350**
 CITY-ST-ZIP **Alpharetta, GA 30005**

TITLE **V** Delete
 NAME **ZOROMSKY, HOWARD**
 STREET ADDRESS **~~4200 W. CYPRESS ST. #444~~**
 CITY-ST-ZIP **~~TAMPA, FL 33607~~**

TITLE Change Addition
 NAME
 STREET ADDRESS **925 North Point Parkway #350**
 CITY-ST-ZIP **Alpharetta, GA 30005**

TITLE **V** Delete
 NAME **SHAW, JERRY**
 STREET ADDRESS **4200 W CYPRESS ST # 444**
 CITY-ST-ZIP **TAMPA, FL 33607**

TITLE **Vice President** Change Addition
 NAME **Anthony C. Martin**
 STREET ADDRESS **121 South Orange Ave.**
 CITY-ST-ZIP **Orlando, FL 32801**

TITLE **S** Delete
 NAME **SEMANS, EDWARD**
 STREET ADDRESS **4200 W. CYPRESS STREET., STE 444**
 CITY-ST-ZIP **TAMPA, FL 33607**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Barry Greenfield **BARRY GREENFIELD** 21 April 08 813-877-4444
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #