

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000000671 (8)

1. Corporation Name

SOUTHERN LEATHER COMPANY OF ALABAMA

Principal Place of Business

274 MONROE
MEMPHIS TN 38103

Mailing Address

274 MONROE
MEMPHIS TN 38103

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Section 607.07(2) and 607.15(3), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I, the undersigned, in compliance with the appointment as registered agent, I am familiar with and accept the obligations of Section 607.07(2), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	PVCD		
	LOEWENBERG, WILLIAM I		
	274 MONROE		
	MEMPHIS TN 38103		
	V		
	CARDOSI, L S		
	274 MONROE		
	MEMPHIS TN 38103		
	S		
	NEWSOM, JOE		
	274 MONROE		
	MEMPHIS TN 38103		
	SD		
	FELT, JOEL		
	274 MONROE		
	MEMPHIS TN 38103		
	CD		
	LOEWENBERG, WILLIAM A		
	274 MONROE		
	MEMPHIS TN 38103		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY - ST - ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY - ST - ZIP
13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY - ST - ZIP
17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information included on this annual report is supplied in good faith and 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. The person or persons who produced or caused the report to be produced by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or added after report was filed.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/96

901-525-1200

Division of Corporations

CR2E034 (12/95)