FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

NAMÉ

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-\$1-7IP

CITY - ST - ZIP



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600001296 (0)

SOUTHERN FINANCIAL GROUP, INC. OF S.C.

Principal Place of Business Mailing Address 1340 PICKENS ST PO BOX 12619 COLUMBIA SC 20201 COLUMBIA SC 29211 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/13/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 57-0803652 Not Applicable Suite, Apt #. etc Suito, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State Cily & State 6. Election Campaign Financing \$5.00 May Bo 23 28 Trust Fund Contribution Added to Fees Country Z_{Φ} Country 8. This corporation owes or has paid the current year Intangible 24 25 Yes. 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MOYER, TIM 640 N ORLANDO AVE #1004 82 Street Address (P.O. Box Number is Not Acceptable) MAITLAND FL 32751 RR 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0508, Florida Statutes. SIGNATURE Signature typics or proted name of registered agent and (de-if applicable (NOTE_Registered Agent's gnature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE THEF 1.1]([[8 Change Addition MCKITTRICK, C. DENNIS NAME 1.2 NAMÉ 121 BRIARWOOD LANE STREET ADDRESS 1.3 STREET ADDRESS **SUMMERVILLE SC 29483** CHY-ST-ZIF 1.4 CHY-ST-ZIP DELETE HILE 2.1 11111 Change Addition COLLINS, C. DAVID NAME 2.2 NAME 210 BEAUFORT ST. STREET ADDRESS 2.3 STREET ADDRESS **SUMMERVILLE SC 29483** CH1Y - S1 - 71P 2 4 CHY-S1-7IP DELETE THILE 3.1 TITLE Change ___ Addition MAURER, MARK NAME 3.2 NAMI 919 BELTLINE BLVD. STREET ADDRESS 3.3 STREET ADDRESS COLUMBIA SC 29205 CITY-ST-7# 34. C(TY-ST-ZIP DELETE Change 10 LF Addition 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS C:TY-ST-ZIP 4.4 CITY - ST - 7IP DELFTE THLE 5.1 TITLE ☐ Addition

14. I hereby certify that the information supplied with this hiling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 13 if changed, of on an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-7IP

5.4 CITY - \$1 - ZIP

9-111 10

CR2E034

Change

___ Addition

FILED

Sep 17 1998 8:00am

Secretary of State