

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G02618

**FILED**  
**Jan 28, 2010**  
**Secretary of State**

**Entity Name:** SOUTHERN FINANCIAL SYSTEMS CORPORATION

**Current Principal Place of Business:**

3605 DEVON STREET  
TAMPA, FL 33605 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 1829  
OXFORD, MS 38655 US

**New Mailing Address:**

**FEI Number:** 59-2225717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOWERY, ROBERT L MANAGER  
3605 DEVON STREET  
TAMPA, FL 38655 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: WRIGHT, J. GARY  
Address: 306 SEGREST POINTE  
City-St-Zip: OXFORD, MS 38655

I hereby 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 all other like empowered.

SIGNATURE: J GARY WRIGHT

PRES

01/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date