# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Feb 12, 2008**
**Secretary of State**

DOCUMENT# G68193

**Entity Name:** SOUTHERN MAINTENANCE SYSTEMS, INCORPORATED

**Current Principal Place of Business:**

3939 S.E. 14TH PLACE
OCALA, FL 34471 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 633
OCALA, FL 344780633

**New Mailing Address:**

**FEI Number: 59-2250475** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

HILLS, JAMES T
3939 S.E. 14TH PL
OCALA, FL 34471 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

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete
Name: HILL, JAMES T
Address: 3939 S.E. 14TH PLACE
City-St-Zip: OCALA, FL 34471

Title: VP ( ) Delete
Name: HILL, SHERYL L
Address: 3939 S.E. 14TH PL.
City-St-Zip: OCALA, FL 34471

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition
Name: HILL, SHERYL L
Address: 3939 S.E. 14TH PLACE
City-St-Zip: OCALA, FL 34471

Title: VP (X) Change ( ) Addition
Name: HILL, JAMES T
Address: 3939 S.E. 14TH PL.
City-St-Zip: OCALA, FL 34471

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: SHERYL L. HILL PRES 02/12/2008

Electronic Signature of Signing Officer or Director Date