

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

5/29/2008-90197-049-\$150.00-\$150.00

FILED

08 JUN 20 AM 8:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1st MOORE CR2E034 (10/07)

DOCUMENT # J12450 1. Entity Name SOUTHERN MACHINE & FABRICATION, INC.			
Principal Place of Business 6731 STUART AVE., #3 JACKSONVILLE FL 32254 US		Mailing Address 6731 STUART AVE., #3 JACKSONVILLE FL 32254 US	
2. Principal Place of Business - No P.O. Box # 369 BLANDING BLVD Suite, Apt. #, etc. #1005		3. Mailing Address 369 BLANDING BLVD Suite, Apt. #, etc. #1005	
City & State ORANGE PARK FL		City & State ORANGE PARK FL	
Zip 32073		Zip 32073	
Country		Country	
4. FEI Number 59-2666681		Applied For Not Applicable	
5. Certificate of Status Desired ☐		58.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VAN CLIEF, LINDA 6731 STUART AVE., #3 JACKSONVILLE FL 32254		7. Name and Address of New Registered Agent Name: Linda S Van Clief Street Address (P.O. Box Number is Not Acceptable): 369 Blanding Blvd #1005 City: Orange Park FL Zip Code: 32073	
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: <u>Linda S Van Clief</u> DATE: <u>5/29/2008</u>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		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 NAME STREET ADDRESS CITY-ST-ZIP	P VAN CLIEF, BRUCE W. 6731 STUART AVE., #3 JACKSONVILLE FL 32254 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Bruce W Van Clief ☒ Change ☐ Addition 369 Blanding Blvd #1005 Orange Park FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST VAN CLIEF, LINDA S. 6731 STUART AVE., #3 JACKSONVILLE FL 32254 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Linda S Van Clief ☐ Change ☐ Addition 369 Blanding Blvd #1005 Orange Park FL 32073
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u>Linda S Van Clief</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		904 276-4341 Date	