**FILED** 

Apr 28, 2003 8:00 am Secretary of State

## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **J51832**

1. Entity Name

SOUTHERN MANAGEMENT SERVICES, INC.						04-28-2003 90233	039 ****150	).UU	
Principal Place of Business % WILLIAM G. BUCKLES, JR. 455 N INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770 US		Mailing Address % WILLIAM G. BUCKLES. JR. 455 N INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770 US							
2. Principal F	3. Mailing Address	g Address			i indiiin dini ainn indi ibida ilin siiin jihi di	() BIBIS BIBIS BIBSS B	ileli vivii ievi		
10225 Ulmerton Rd. 10225 Ulmerton			ond R	d					
Suite, Apt. #, etc. Suite, Apt. #, etc.						CHECK HERE IF MAK	ING CHANGES		
Suite 3D Suite 3									
City & State City & State						FEI Number <b>59-2793177</b>	<del>                                      </del>	oplied For	
Largo, FL Largo, Zip Country Zip			FL Country					ot Applicable	
	1 ' 1			•	5. Certificate of Status Desired				
33771	USA 6. Name and Address of Current I		US,	<u>A</u> _	7.	Name and Address of New Register			
					Name				
BUCKLES	, WILLIAM G., JR.								
455 N INDIAN ROCKS RD				Street Address (P.O. Box Number is Not Acceptable) 10225 Ulmerton Rd.					
BELLEAIR BLUFFŞ FL 33770				Suite 3D					
	, j			City L <b>argo</b>		F	Zip Cod 337	<sup>le</sup> 71	
	named entity submits this statement for tions of registered agent.	the purpose of changing is	ts registere	ed office or	registered ag	gent, or both, in the State of Florida. 1	am familiar with,	and accept	
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NC	TE: Registered	i Agent signatu	re required when re	reinstating) DA	Ē		
FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State						Election Campaign Financing     Trust Fund Contribution.		00 May Be d to Fees	
10.	・資行 OFFICERS AND I	DIRECTORS	11,		ĀC	DDITIONS/CHANGES TO OFFICERS /	ND DIRECTOR	S IN 11	
TITLE	D :*	☐ Delete	TITLE				Change	☐ Addition	
NAME	VELTMAN, DAVID M.			•	10005			·	
STREET ADDRESS	455 N INDIAN ROCKS RD			ET ADDRESS	10225 Ulmerton Rd., #3D				
CITY-ST-ZIP	BELLEAIR BLUFFS FL			ST-ZIP	Largo,	FL 33771			
TITLE	PD PRINCIPLE PARTICIPAN O	☐ Delete	TITLE		•		Change	☐ Addition	
NAME			NAME	- 1	10225 Ulmerton Rd., #3D				
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS ST-ZIP	Largo, FL 33771				
			_		nargo,	FL 33771	N-/01		
TITLE NAME	VD BARODY, MICHAEL	☐ Delete	TITLE NAME			ار منسلم همونیونی در در در در این	Change	Addition	
STREET ADDRESS	455 N INDIAN ROCKS RD			ET ADDRESS	10225	Ulmerton Rd., #3D		Ì	
CITY-ST-ZIP	BELLEAIR BLUFFS FL			ST-ZIP	Largo, FL 33771				
TITLE	ST	☐ Delete	TITLE	Ì		,	Change	☐ Addition	
NAME	DUFFY, SHEILA		NAME		* *	and the second s	7	_	
STREET ADDRESS	455 N INDIAN ROCKS RD		STREE	T ADDRESS		Ulmerton Rd., #3D			
CITY-ST-ZIP	BELLEAIR BLUFFS FL		CITY-	ST-ZIP	Largo,	FL 33771			
TITLE	VD	☐ Delete	TITLE	T			Change	☐ Addition	
NAME	VELTMAN, GREG		NAME				/\		
STREET ADDRESS	455 N INDIAN ROCKS RD			ET ADDRESS		Ulmerton Rd., #3D		}	
CITY-ST-ZIP	BELLEAIR BLUFFS FL	<u></u>	CITY-	ST-ZIP	Largo,	FL 33771			
TITLE		☐ Delete	TITLE				Change	☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receiper 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

NATURE AND TYPED OR MINTENNAME OF SIGNING OFFICER OR DIRECTO

3/17/03

Daytime Phone #

CHZE034 (10/02)