FILED

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J62430 1. Entity Name SOUTHARD MARKETS, INC.							Feb 24, 2002 8:00 am Secretary of State 02-24-2002 90066 001 ***150.00				
Principal Plac C/O RUSSELL 201 WILLIAM KEY WEST FL	. G. Pantelis St.		Mailing Address C/O RUSSELL G. PANTELIS 201 WILLIAM ST. KEY WEST FL 33040								
2. Principal P	lace of Busin	ess	3. Mailing Address				I H eirid B ai d D ail d aidht Bidad Iarid	4611 91911 61911	AIDII DIBII AI	AFI DIDIF IDDI **	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State			4. F	4. FEI Number 59-2828959 Applied For Not Applicable				
Zip	p Country		Zip	Zip Count		5. C	Certificate of Status Desired		8.75 Add	litional	
	6Name	and Address of Current R				7. N	7. Name and Address of New Registered Agent				
PANTELIS, RUSSELL G. 201 WILLIAM STREET KEY WEST FL 33040					Name Street Address (P.O. Box Number is Not Acceptable)						
NET WEST TE SOOTS					City			FL	Zip Code		
9. This corporate filing r	Signature, typed	or printed name of registered agent ar ble to satisfy its Intangible and elects to do so.	FILE NOW! After May 1, 200 Make Check Payab	Registere	d Agent signature red	quired when rei	10. Election Campaign Fina Trust Fund Contribution	DATE noting	Ådded	0 May Be to Fees	
11. TITLE NAME STREET ADDRESS CITY-ST-ZIP		OFFICERS AND E RUSSELL G. AM STREET FL	Delete			ADI	DITIONS/CHANGES TO OFFIC		DIRECTORS Change	Addition	
TITLE NAME # STREET ADORESS CITY-ST-ZIP		, REBECCA C. AM STREET	☐ Delete					[Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•		∸· 🖃 Delete -		1	من ييرجيد	er gungegering i Sumeren	~ . [Change :	Addition Addition	
TITLE NAME STREET ADDRESS CITY-SI-ZIP			☐ Delete :			_			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					[Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLI NAM STRE CITY	E E EET ADORESS -ST-ZIP		19 07(3)(i) Florida Statutes II		Change	Addition	

13. 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305296-0718

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