2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 16, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000017239

1. Entity Name

SOUTHERN MARKETING, L.L.C.

Principal Place of Business	Mailing Address
951 BROKEN SOUND PKWY., N.W., STE. 13 BOCA RATON FL 33487	951 BROKEN SOUND PKWY., N.W., STE. 13 BOCA RATON FL 33487

1st MOORE CR2E083 (10/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 48-1265532 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COHN, JERALD N 951 BROKEN SOUND PKWY., N.W., STE. 135 BOCA RATON FL 33487	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM COHN, JERALD N 951 BROKEN SOUND PKWY NW, STE 135 BOCA RATON FL 33487	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	U00000436119 02/27/06-80024-019 50.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR TANNEN, DAVID E 951 BROKEN SOUND PKWY NW, STE 135 BOCA RATON FL 33487	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR HERTER, THOMAS R 951 BROKEN SOUND PKWY NW, STE 135 BOCA RATON FL 33487	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR REX, RAYMOND 951 BROKEN SOUND PKWY NW, STE 135 BOCA RATON FL 33487	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Jerald N Cohn 2/13/06 561 241 9624
SIGNATURE AND TYPED OR PRINTED NAME OF ENTITLED MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE