FILED
Apr 25, 2008 08:00 AM
Secretary of State

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000008307

1. Entity Name
SOUTHERN COMFORT ENTERPRISES LLC

Principal Place of Business	Mailing Address
2004 CHICKASAW TRAIL ORLANDO, FL 32825	2004 CHICKASAW TRAIL ORLANDO, FL 32825

DO NOT WRITE IN THIS SPACE

042320083No Chg-LLC CR2E083 (12/07)

4. FEI Number
84-1642578
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

COWARD, JACK R
2004 CHICKASAW TRAIL
ORLANDO, FL 32825

DO NOT WRITE IN THIS SPACE

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

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	COWARD, JACK R
STREET ADDRESS	2004 CHICKASAW TRAIL
CITY-ST-ZIP	ORLANDO, FL 32825
TITLE	MGRM
NAME	COWARD, SHARON K
STREET ADDRESS	2004 CHICKASAW TRAIL
CITY-ST-ZIP	ORLANDO, FL 32825
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000021486
05/15/08-80008-018 138.75

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 606, Florida Statutes.

SIGNATURE: Jack R Coward 4-23-08 407-273-1156
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #