

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000049636

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** SOUTHERN FINANCIAL TRUST, LLC

**Current Principal Place of Business:**

1083 N. COLLIER BLVD  
SUITE 302  
MARCO ISLAND, FL 34145

**New Principal Place of Business:**

1083 N. COLLIER BLVD  
SUITE 102  
MARCO ISLAND, FL 34145

**Current Mailing Address:**

1083 N. COLLIER BLVD.  
SUITE  
MARCO ISLAND, FL 34145

**New Mailing Address:**

1083 N. COLLIER BLVD.  
SUITE 102  
MARCO ISLAND, FL 34145

**FEI Number:** 20-2862383

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NACHEF, JOHN P  
1083 N. COLLIER BLVD  
SUITE 302  
MARCO ISLAND, FL 34145 US

**Name and Address of New Registered Agent:**

NACHEF, JOHN P  
1083 N. COLLIER BLVD  
SUITE 102  
MARCO ISLAND, FL 34145 US

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.

SIGNATURE: JOHN P NACHEF

04/26/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: NACHEF, JOHN P  
Address: 1083 N. COLLIER BLVD. SUITE 102  
City-St-Zip: MARCO ISLAND, FL 34145 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: JOHN P NACHEF

MM

04/26/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date