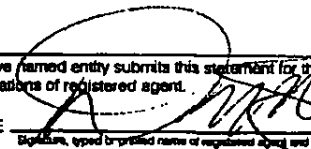
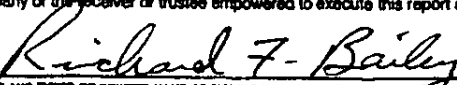


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 30, 2008 8:00 am
Secretary of State

04-09-2008 90128 034 ***138.75

DOCUMENT # L07000053635					
1. Entity Name SOUTH 39 ENTERPRISES, LLC					
Principal Place of Business 5090 SYDNEY ROAD PLANT CITY, FL 33566			Mailing Address 5090 SYDNEY ROAD PLANT CITY, FL 33566		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 26-2331839	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
8. Name and Address of Current Registered Agent DOTON, DANIEL M 121 NORTH COLLINS STREET PLANT CITY, FL 33563				7. Name and Address of New Registered Agent Name COTON, DANIEL M Street Address (P.O. Box Number is Not Acceptable) 121 North Collins Street Plant City, FL 33563 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 4/4/08	
FILE NOW!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition		
		MGRM Richard F. Bailey 5090 Sydney Road Plant City, FL 33566			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition		
		MGRM Brenda Gail Bailey Dion 5090 Sydney Road Plant City, FL 33566			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition		
		MGRM William E. Bailey, Jr. 5090 Sydney Road Plant City, FL 33566			
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 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 608, Florida Statutes.					
SIGNATURE: 			MGRM 04/04/08 813-		
SIGNATURE AND TYPED OR PRINTED NAME OF BOOKING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Richard F. Bailey					

30008033



03302008 Chg-LLC CR2E083 (12/06)

FL

DATE

Daytime Phone #

967-6841