2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# M03000002339

Entity Name: SOUTHERN CAPITAL BROKERAGE COMPANY, LLC

Current Principal Place of Business:

1401 LIVINGSTON LANE
JACKSON, MS 39213 US

New Principal Place of Business:

Current Mailing Address:

LISA ROBERTSON
P. O. BOX 78
JACKSON, MS 39205 US

New Mailing Address:

FEI Number: 11-3671043 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEE, TOMMY W
5700 SW 34TH ST
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	WOOTEN, LARRY B	
Address:	6000 CANADERO DRIVE	
City-St-Zip:	RALEIGH, NC 27612 US	
Title:	MGRM	( ) Delete
Name:	FAVREAU, LARRY	
Address:	4741 W CHERYL DR	
City-St-Zip:	JACKSON, MS 39211 US	
Title:	MGRM	( ) Delete
Name:	STROBLE, JOEY	
Address:	2205 HERITAGE HILL DR	
City-St-Zip:	JACKSON, MS 39211 US	
Title:	MGRM	( ) Delete
Name:	GIANFRANCESCO, GINO	
Address:	215 DEER RUN	
City-St-Zip:	RIDGELAND, MS 39157 US	
Title:	MGRM	( ) Delete
Name:	JOHNS, RANDY	
Address:	300 RED EAGLE CIRCLE	
City-St-Zip:	RIDGELAND, MS 39157 US	
Title:	MGRM	( ) Delete
Name:	WARD, ROBERT E JR	
Address:	26 EASTBROOKE CIRCLE	
City-St-Zip:	MADISON, MS 39110 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ROBERT E. WARD, JR. MGRM 04/28/2008

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