

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000006638

**FILED**  
**Jun 15, 2004**  
**Secretary of State****Entity Name:** THE SOUTHERN MOVEMENT FOR INDEPENDENCE, INC.**Current Principal Place of Business:**PO BOX 38550  
TALLAHASSEE, FL 323158550**New Principal Place of Business:**7951 SOUTHGATE BLVD.  
UNIT F-2  
NORTH LAUDERDALE, FL 33068**Current Mailing Address:**PO BOX 38550  
TALLAHASSEE, FL 323158550**New Mailing Address:**7951 SOUTHGATE BLVD.  
UNIT F-2  
NORTH LAUDERDALE, FL 33068**FEI Number:** 56-2299180**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WILSON, LESLIE  
9890 DEERLAKE EAST  
SUITE 1  
TALLAHASSEE, FL 32312 US**Name and Address of New Registered Agent:**PAYNE, DENISE M  
7951 SOUTHGATE BLVD.  
UNIT F-2  
NORTH LAUDERDALE, FL 33068 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: DENISE PAYNE

06/15/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SATTERWHITE, JOHN  
Address: 12202 N 22ND STREET APT 414  
City-St-Zip: TAMPA, FL 33612

Title: V ( ) Delete  
Name: RACKENSPERGER, TRACY  
Address: 988 STONEWOOD LANE  
City-St-Zip: MAITLAND, FL 32751

Title: T/S ( ) Delete  
Name: SHELDON, MARTHA  
Address: 8015 SW 107TH AVE APT 102  
City-St-Zip: MIAMI, FL 33173

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTHA SHELDON

T/S

06/15/2004

Electronic Signature of Signing Officer or Director

Date