

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010010

FILED
Apr 09, 2012
Secretary of State

Entity Name: THE SOUTHERN LEGENDS ENTERTAINMENT AND PERFORMING ARTS HALL OF FAME CORP

Current Principal Place of Business:

1617 PINE LANE DRIVE
CANTONMENT, FL 32533

New Principal Place of Business:

Current Mailing Address:

1617 PINE LANE DRIVE
CANTONMENT, FL 32533

New Mailing Address:

FEI Number: 20-3552698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MORRIS, ROBERT L
1617 PINE LANE DRIVE
CANTONMENT, FL 32533 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: ROBERT L. MORRIS
Address: 1617 PINE LANE DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: D
Name: CROOKE, RANDALL W
Address: 10208 EDENDALE
City-St-Zip: CANTONMENT, FL 32533

Title: D
Name: CASE, JIM
Address: 408 WESTLAND STREET
City-St-Zip: PORTLAND, TN 37148

Title: D
Name: SULLIVAN, ROBERT
Address: ROUTE 1, BOX 119
City-St-Zip: MCALESTER, OK

Title: D
Name: REEDER, THOMAS
Address: 14453 GOLD OAK ROAD
City-St-Zip: CENTERVILLE, VA 20121

Title: MS
Name: SHELIA MORRIS
Address: 1617 PINE LANE DR
City-St-Zip: CANTONMENT, FL 32533 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT L. MORRIS

PRES

04/09/2012

Electronic Signature of Signing Officer or Director

Date