2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000397

Entity Name: SOUTHERN SHOCKERS INC.

FILED Jan 05, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8255 SW SUNNYBREEZE DR ARCADIA, FL 34266 US

Current Mailing Address: New Mailing Address:

8255 SW SUNNYBREEZE DR ARCADIA, FL 34266 US

FEI Number: 27-4555095 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WALLACE, KEITH M
2779 SE BROWN RD
4307 NE US 17 #13
ARCADIA, FL 34266 US
ARCADIA, FL 34266 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: 01/05/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: JETER, MICHAEL

Address: 8255 SW SUNNYBREEZE DR City-St-Zip: ARCADIA, FL 34266 US

Title: VP

Name: LIPE, THOMAS
Address: 9162 LIPE RD SW
City-St-Zip: ARCADIA, FL 34266 US

Title: TREA

Name: JETER, ANDREA

Address: 8255 SW SUNNYBREEZE DR City-St-Zip: ARCADIA, FL 34269 US

Title: DIR

Name: HAZEN, BRENT

Address: 2375 NW BROWNVILLE ST City-St-Zip: ARCADIA, FL 34266 US

Title: DIR

 Name:
 WALLACE, KEITH M

 Address:
 4307 NE US 17 #13

 City-St-Zip:
 ARCADIA, FL 34266 US

Title: DIR

Name: HAZEN, SHARON

Address: 2375 NW BROWNVILLE ST City-St-Zip: ARCADIA, FL 34266 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: KEITH M. WALLACE DIR 01/05/2012