

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46053

FILED
Apr 27, 2005
Secretary of State

Entity Name: SOUTHERN COUNTRY SOUTH FLORIDA, INC.

Current Principal Place of Business:

PO BOX 23512
FT LAUDERDALE, FL 333073512 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 23512
FT LAUDERDALE, FL 33307 US

New Mailing Address:

FEI Number: 65-0895007 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ARGENBRIGHT, JUDY
4896 ALFRESCO STREET
BOCA RATON, FL 33428 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: D () Delete
Name: BOONE, ROGER
Address: 2925 NW 5TH AVE
City-St-Zip: WILTON MANORS, FL 33311

Title: TSD () Delete
Name: ARGENBRIGHT, JUDY
Address: 4896 ALFRESCO STREET
City-St-Zip: BOCA RATON, FL 33048

Title: D () Delete
Name: HOSTLER, RICHARD
Address: 3639 NW 17TH TERRACE
City-St-Zip: OAKLAND PARK, FL 33309

Title: D (X) Delete
Name: VANEK, ROBERT
Address: 1200 SW 12TH STREET #D207
City-St-Zip: FORT LAUDERDALE, FL 33315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: THOMAS SR, DOUGLASS H
Address: 1101 SOUTH HILLCREST COURT APT 308
City-St-Zip: HOLLYWOOD, FL 33021

Title: TSD (X) Change () Addition
Name: ARGENBRIGHT, JUDY L
Address: 4896 ALFRESCO STREET
City-St-Zip: BOCA RATON, FL 33048

Title: D (X) Change () Addition
Name: PETERS, LEONARD A
Address: 3333 NE 34TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33308

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: JUDY LYNN ARGENBRIGHT

TSD

04/27/2005

Electronic Signature of Signing Officer or Director

Date