

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46053

FILED
Mar 31, 2008
Secretary of State

Entity Name: SOUTHERN COUNTRY SOUTH FLORIDA, INC.

Current Principal Place of Business:

BOX 23512
FT LAUDERDALE, FL 333073512 US

New Principal Place of Business:

4896 ALFRESCO STREET
BOCA RATON, FL 33428 US

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:

LABRIE, JAMES
1514 NE 20TH ST
FORTLAUDERDALE, FL 33305 US

Name and Address of New Registered Agent:

ARGENBRIGHT, JUDY
4896 ALFRESCO STREET
BOCA RATON, FL 33428 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: JUDY ARGENBRIGHT

03/31/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LABRIE, JAMES
Address: 1514 NE 20TH ST
City-St-Zip: FORTLAUDERDALE, FL 33305

Title: D () Delete
Name: BULLIS, TODD
Address: 2420 NW 64 TERRACE
City-St-Zip: SUNRISE, FL 33313

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

Title: D () Delete
Name: FONESCA, WILSON
Address: 2420 NW 64 TERRACE
City-St-Zip: SUNRISE, FL 33313

Title: D (X) Delete
Name: WALSH, FRANK
Address: 5073 NE 14 TERRACE
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ARGENBRIGHT, JUDY
Address: 4896 ALFRESCO STREET
City-St-Zip: BOCA RATO, FL 33428

Title: D (X) Change () Addition
Name: FOX, LEE
Address: 160 NE 58TH STREET
City-St-Zip: FORT LAUDERDAL, FL 33334

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

Title: D (X) Change () Addition
Name: KELLER, GINA
Address: 7525 SW 8TH COURT
City-St-Zip: NORTH LAUDERDALE, FL 33068

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 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 ARGENBRIGHT

D

03/31/2008

Electronic Signature of Signing Officer or Director

Date