2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 10, 2008
Secretary of State

DOCUMENT# N96000002177

Entity Name: SOUTHERN SHUTTER ASSOCIATION, INC.

Current Principal Place of Business:

400 W MCNAB RD
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

400 W MCNAB RD
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 65-0671355 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVINE, ROBIN
400 WEST MCNAB
FT LAUDERDALE, FL 33309 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: PD ( ) Delete
Name: O'CONNOR, TIM
Address: 400 W MCNAB RD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: STD ( ) Delete
Name: LEVINE, ROBIN
Address: 400 W MCNAB RD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: D ( ) Delete
Name: BROWN, MICHAEL
Address: 400 W MCNAB RD
City-St-Zip: FT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LACKORE, KURT
Address: 400 W MCNAB RD
City-St-Zip: FT LAUDERDALE, FL 33309

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

Title: D (X) Change ( ) Addition
Name: JOHNSTON, THOMAS
Address: 400 W MCNAB RD
City-St-Zip: FT LAUDERDALE, FL 33309

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: KURT LACKORE PD 06/10/2008

Electronic Signature of Signing Officer or Director — Date