2005 FOR PROFIT CORPORATION

FILED Mar 05, 2005 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P00000091521 SOUTHERN BUSINESS CONSULTING, INC. Principal Place of Business Mailing Address 13592 LAKE POINT DRIVE SOUTH 13592 LAKE POINT DRIVE SOUTH CLEARWATER, FL 33762 CLEARWATER, FL 33762 01262005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 59-3672829 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GLAUM, ROY W DO NOT WRITE 13592 LAKE POINT DRIVE SOUTH CLEARWATER, FL 33762 IN THIS SPACE 8. The above named entity subfinits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agont and title II applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME GLAUM, ROY W STREET ADDRESS 13592 LAKE POINT DRIVE SOUTH '05/05-80008-014 150.00 CITY-ST-ZIP CLEARWATER, FL 33762 TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY -ST-ZIP