

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000098643

Entity Name: SOUTHERN ENDEAVORS, INC.

FILED
Mar 06, 2008
Secretary of State

Current Principal Place of Business:

14015 29 ROAD
LAKE CITY, FL 32024

New Principal Place of Business:

12679 CR 137
WELLBORN, FL 32094 US

Current Mailing Address:

14015 29 ROAD
LAKE CITY, FL 32024

New Mailing Address:

PO BOX 440
WELLBORN, FL 32094 US

FEI Number: 59-3679210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRICKSON, THOMAS D
14015 29 ROAD
LAKE CITY, FL 32024 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRTS () Delete
Name: HENDRICKSON, TOM
Address: 14015 29 RD
City-St-Zip: LAKE CITY, FL 32024

Title: ST () Delete
Name: HENDRICKSON, ROBIN
Address: 14015 29 RD
City-St-Zip: LAKE CITY, FL 32024

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change () Addition
Name: HENDRICKSON, TOM
Address: 14015 29 RD
City-St-Zip: LAKE CITY, FL 32024 US

Title: VP (X) Change () Addition
Name: HENDRICKSON, ROBIN
Address: 14015 29 RD
City-St-Zip: LAKE CITY, FL 32024

Title: STR () Change (X) Addition
Name: HENDRICKSON, STEVEN
Address: 13646 29TH ROAD
City-St-Zip: LAKE CITY, FL 32024 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RH

VP

03/06/2008

Electronic Signature of Signing Officer or Director

Date