

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000050457

FILED
Apr 25, 2007
Secretary of State

Entity Name: SOUTHERN FURNITURE LEASING, INC.

Current Principal Place of Business:

705 S. WOODWARD AVE.
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

705 S. WOODWARD AVE.
TALLAHASSEE, FL 32304

New Mailing Address:

P O BOX 2497
TALLAHASSEE, FL 32316

FEI Number: 59-3720472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCALISTER, LYLE
705 S. WOODWARD AVE.
TALLAHASSEE, FL 32304 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: P () Delete
Name: MCALISTER, LYLE
Address: 705 S. WOODWARD AVE.
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCALISTER, LYLE E PRES
Address: 705 S. WOODWARD AVE.
City-St-Zip: TALLAHASSEE, FL 32304

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: LYLE E. MCALISTER

PRES

04/25/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date