2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000002891

Entity Name: SOUTHBANK CONSULTING GROUP, INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1200 RIVERPLACE BLVD SUITE 902 4446 HENDRICKS AVE JACKSONVILLE, FL 32207

SUITE 368

JACKSONVILLE, FL 32207

Current Mailing Address: New Mailing Address:

501 RIVERSIDE AVE, SUITE 902 4446 HENDRICKS AVE JACKSONVILLE, FL 32202

SUITE 368

JACKSONVILLE, FL 32202

FEI Number: 74-3026966 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

FRANKLIN, BEN T FRANKLIN, BEN T 1200 RIVERPLACE BLVD, 4446 HENDRICKS AVE SUITE 902 SUITE 368 JAX, FL 32207 US JAX, FL 32207 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: BEN T. FRANKLIN, JR. 04/28/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

FRANKLIN, BEN T JR FRANKLIN, BEN T JR Name: Name:

1200 RIVERPLACE BLVD SUITE 902 4446 HENDRICK AVE SUITE 368 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: JACKSONVILLE, FL 32202

Title: Title: () Delete (X) Change () Addition

Name: DAHL, JAMES H Name: DAHL, JAMES H

1200 RIVERPLACE BLVD SUITE 902 501 RIVERSIDE AVE SUITE 902 Address: Address:

JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32202 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete

CAHOON, ARTHUR L CAHOON, ARTHUR L Name: Name:

1200 RIVERPLACE BLVD SUITE 902 501 RIVERSIDE AVE SUITE 902 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: JACKSONVILLE, FL 32202

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: BEN T. FRANKLIN, JR. **PRES** 04/28/2008