2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000075953

PEREAU, KEITH W

1510 WAYWARD WIND LN

ORANGE PARK, FL 32003

Name:

Address:

City-St-Zip:

FILED Feb 27, 2005 Secretary of State

Entity Name: SOUTHERN INVESTMENTS ONE, INC. **Current Principal Place of Business: New Principal Place of Business:** 3865 ELRIDGE AVE 3869 ELDRIDGE AVE. ORANGE PARK, FL 32073 ORANGE PARK, FL 32073 **Current Mailing Address: New Mailing Address:** P.O. BOX 9300 ORANGE PARK, FL 32006 FEI Number: 56-2281522 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALLACE, ROBERT 3805 UNIVERSITY BLVD W US JACKSONVILLE, FL 32217 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PST () Delete Title: () Change () Addition Name: PEREAU, LYDIA Name: P.O. BOX 9300 Address: Address: City-St-Zip: ORANGE PARK, FL 32006 City-St-Zip: Title: Title: () Delete (X) Change () Addition PEREAU, KIRK E Name: PEREAU. KIRK E Name: 1717 COUNTY ROAD 220 APT 705 3861 ELDRIDGE AVE Address: Address: ORANGE PARK, FL 32003 ORANGE PARK, FL 32073 City-St-Zip: City-St-Zip: Title: (X) Change () Addition Title: () Delete VΡ

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Address:

City-St-Zip:

PEREAU, KEITH W

3859 ELDRIDGE AVE.

ORANGE PARK, FL 32073

SIGNATURE: LYDIA P PEREAU **PRES** 02/27/2005