

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000091131

FILED
Mar 07, 2008
Secretary of State

Entity Name: SOUTHERN TRADITIONS DEVELOPMENT, INC.

Current Principal Place of Business:

1950 W. NEW HAMPSHIRE ST
SUITE B
ORLANDO, FL 32804 US

New Principal Place of Business:

620 W YALE ST
ORLANDO, FL 32804 US

Current Mailing Address:

1950 W. NEW HAMPSHIRE ST
SUITE B
ORLANDO, FL 32804 US

New Mailing Address:

620 W YALE ST
ORLANDO, FL 32804 US

FEI Number: 52-2373502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOY, KIMBERLY
1232 POINSETTIA AVE
ORLANDO, FL 32804 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: FOY, KIMBERLY
Address: 1232 POINSETTIA AVE
City-St-Zip: ORLANDO, FL 32804

Title: V () Delete
Name: PLEVEICH, JON
Address: 1232 POINSETTIA AVE
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KIMBERLY FOY

P

03/07/2008

Electronic Signature of Signing Officer or Director

Date