2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000110151

Entity Name: SUNSOUTH LEASING COMPANY, INC.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
155 CRYSTAL BEACH DR SUITE 108 DESTIN, FL 32541			136 S HOLIDAY ROAD SUITE D MIRAMAR BEACH, FL 32550			
Current Mailing Address:			New Mailing Address:			
P.O. BOX 1 DOTHAN, A						
FEI Number: 3	32-0038113	FEI Number Applied For ()	FEI Num	nber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
MEDLEY, MICHAEL A 155 CRYSTAL BEACH DR SUITE 108 DESTIN, FL 32541 US				MEDLEY, MICHAEL A 136 S HOLIDAY ROAD SUITE D MIRIMAR BEACH, FL 32550 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.						
SIGNATUR	E:				05/01/2007	
	Electronic	Signature of Registered Agent	i .		Date	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR						
Title: Name: Address: City-St-Zip:	D () D SONMOR, JOHN 2664 COUNTY RO HEADLAND, AL 3			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D MEDLEY, MICHAI 14 TWIN OAKS DOTHAN, AL 363	EL A		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D MCCANN, MICHA 34 WOODMERE DOTHAN, AL 363	EL P DRIVE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D BEAN, MICHAEL A 106 HIDDEN PINE DOTHAN, AL 363	A E PL.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CASH, JOHN W	elete SHWAY 98, #301B 41		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	O () D TRIMM, ROBIN 405 WESTBROO DOTHAN, AL 363			Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ROBIN TRIMM O 05/01/2007