2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000134810

1. Entity Name
SOUTHERN CONCESSIONS, INC.

Principal Place of Business	Mailing Address
8916 HWY. 85 NORTH LAUREL HILL, FL 32567	8916 HWY. 85 NORTH LAUREL HILL, FL 32567

DO NOT WRITE IN THIS SPACE

01102008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-1167923	Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JERKINS, JAMES K
8916 HWY. 85 NORTH
LAUREL HILL, FL 32567

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _Darcy Jerkins_ VSD _Jam Jer_ /PD 1/10/08

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 After May 1, 2008 Fee will be $550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	$5.00 May Be Added to Fees	U00000834324 02/28/08-80047-023 159.75

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	JERKINS, JAMES K
STREET ADDRESS	8916 HWY. 85 NORTH
CITY-ST-ZIP	LAUREL HILL, FL 32567
TITLE	VSD
NAME	JERKINS, DARCY
STREET ADDRESS	8916 HWY. 85 NORTH
CITY-ST-ZIP	LAUREL HILL, FL 32567
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Darcy Jerkins_ 1/10/08 850-652-4792

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #