

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000022564

FILED
Apr 07, 2004
Secretary of State

Entity Name: SOUTHERN FUNDING GROUP, INC.

Current Principal Place of Business:

ROUTE 30, BOX 1121
LAKE CITY, FL 32055

New Principal Place of Business:

152 SE DEFENDER DRIVE
LAKE CITY, FL 32025

Current Mailing Address:

ROUTE 30, BOX 1121
LAKE CITY, FL 32055

New Mailing Address:

PMB 225 2109 US HWY 90 W
STE 170
LAKE CITY, FL 32055

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRIX, SABRINA KAY
ROUTE 30, BOX 1121
LAKE CITY, FL 32055 US

Name and Address of New Registered Agent:

HENDRIX, SABRINA KAY
436 BISHOP AVE
LAKE CITY, FL 32055 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: SABRINA K HENDRIX

04/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HENDRIX, SABRINA KAY
Address: ROUTE 30, BOX 1121
City-St-Zip: LAKE CITY, FL 32055

Title: PD () Delete
Name: MORRISON, JOHN A.
Address: ROUTE 30, BOX 1121
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HENDRIX, SABRINA KAY
Address: PMB 225 2109 US HWY 90 W STE 170
City-St-Zip: LAKE CITY, FL 32055

Title: PD (X) Change () Addition
Name: MORRISON, JOHN A.
Address: PMB 225 2109 US HWY 90 W STE 170
City-St-Zip: LAKE CITY, FL 32055

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.

SIGNATURE: SABRINA K HENDRIX

D

04/07/2004

Electronic Signature of Signing Officer or Director

Date