

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000060993

Entity Name: SOUTHERN ELEGANCE LIMOUSINES, INC

FILED
Apr 29, 2006
Secretary of State

Current Principal Place of Business:

1632 HERRING LANE
CLERMONT, FL 34711

New Principal Place of Business:

1632 HERRING LANE
CLERMONT, FL 34714

Current Mailing Address:

P.O. BOX 136651
CLERMONT, FL 34713

New Mailing Address:

1519 PINE AVENUE
ORLANDO, FL 32824

FEI Number: 57-1177653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HALE, ADAM R
1632 HERRING LANE
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

HALE, ADAM R
1632 HERRING LANE
CLERMONT, FL 34714 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:

04/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HALE, ADAM R
Address: 1632 HERRING LANE
City-St-Zip: CLERMONT, FL 34714 US

Title: VP () Delete
Name: BURGOS, GEORGE
Address: 1208 COURTNEY CHASE CIRCLE APT#1035
City-St-Zip: ORLANDO, FL 32837 US

Title: SEC () Delete
Name: HALE, SUSAN E
Address: 1632 HERRING LANE
City-St-Zip: CLERMONT, FL 34714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: HALE, SUSAN E
Address: 1632 HERRING LANE
City-St-Zip: CLERMONT, FL 34714 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ADAM HALE

P

04/29/2006

Electronic Signature of Signing Officer or Director

Date