2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2007 08:00 A
Secretary of State

DOCUMENT # P04000021755

1. Entity Name
OLD SOUTH INVESTMENTS, INC.

Principal Place of Business	Mailing Address
17687 ASHLEY DR PANAMA CITY BEACH, FL 32413	POXT OFFICE BOX 9088 PANAMA CITY BEACH, FL 32417

01102007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0660657

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HARE, DIANE C CPA
2589 JENKS AVENUE
PANAMA CITY, FL 32405

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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 _____
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, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	COX, RICHARD L JR
STREET ADDRESS	POXT OFFICE BOX 9088
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32417
TITLE	VD
NAME	SEAMON, MICHAEL
STREET ADDRESS	1410 THURSO RD
CITY-ST-ZIP	LYNN HAVEN, FL 32444
TITLE	SD
NAME	FLEMING, DARRELL
STREET ADDRESS	124 RUSTY GANS DRIVE
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32408
TITLE	TD
NAME	HARRINGTON, TERESA
STREET ADDRESS	118 RUSTY GANS DR
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32408
TITLE	D
NAME	GORTEMOLLER, JAMES
STREET ADDRESS	208 GOLF CIRCLE
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32413
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/09/07-80010-007 158.75

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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: Richard L Cox Jr 2/26/07 850-234-7800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #