

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000118315

**FILED**  
**Aug 29, 2011**  
**Secretary of State**

**Entity Name:** SOUTHERN ACRYLIC OF FLORIDA, INC.

**Current Principal Place of Business:**

10554 S FEDERAL HWY  
PORT SAINT LUCIE, FL 34952

**New Principal Place of Business:**

757 SE LIGHTHOUSE AVENUE  
PORT SAINT LUCIE, FL 34983

**Current Mailing Address:**

10554 S FEDERAL HWY  
PORT SAINT LUCIE, FL 34952

**New Mailing Address:**

757 SE LIGHTHOUSE AVENUE  
PORT SAINT LUCIE, FL 34983

**FEI Number:** 87-0731623

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MURPHY, GINGER  
10554 S FEDERAL HWY  
PORT ST. LUCIE, FL 34952 US

**Name and Address of New Registered Agent:**

MURPHY, GINGER  
757 SE LIGHTHOUSE AVENUE  
PORT ST. LUCIE, FL 34983 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: \_\_\_\_\_

Electronic Signature of Registered Agent

08/29/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MURPHY, GINGER  
Address: 757 NW LIGHTHOUSE AVE  
City-St-Zip: PORT ST LUCIE, FL 34983

I hereby 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 all other like empowered.

SIGNATURE: GINGER A. MURPHY

P

08/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date