

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000160052

FILED
Nov 02, 2009
Secretary of State**Entity Name:** SOUTHERN CAPITAL FINANCE CORPORATION**Current Principal Place of Business:**1850 AURORA ROAD
MELBOURNE, FL 32935 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 361036
MELBOURNE, FL 32936 US**New Mailing Address:****FEI Number:** 20-1934185**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 US**Name and Address of New Registered Agent:**

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

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: POWER, BRIAN T
Address: 1850 AURORA ROAD
City-St-Zip: MELBOURNE, FL 32935 US

Title: SECR (X) Delete
Name: POWER, HEATHER K
Address: 1850 AURORA ROAD
City-St-Zip: MELBOURNE, FL 32935 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change () Addition
Name: ROBISON, H
Address: PO BOX 361036
City-St-Zip: MELBOURNE, FL 32936 US

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

I hereby certify that the information supplied with this filing does not qualify 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: HEATHER K ROBISON POWER

SECR

11/02/2009

Electronic Signature of Signing Officer or Director

Date