

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000146859

1. Entity Name
SOUTHERN HOLD DOWN, INC.



Principal Place of Business
**34100 OLD BALDWIN RD
CALLAHAN, FL 32011**

Mailing Address
**34100 OLD BALDWIN RD
CALLAHAN, FL 32011**



01192007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3746043

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**RAULERSON, DENNIS C
34100 OLD BALDWIN RD
CALLAHAN, FL 32011**

**DO NOT WRITE
IN THIS SPACE**

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**

000000693874
04/16/07-80057-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RAULERSON, DENNIS C
STREET ADDRESS	34100 OLD BALDWIN RD
CITY-ST-ZIP	CALLAHAN, FL 32011
TITLE	VP
NAME	RAULERSON, DENNIS C
STREET ADDRESS	34100 OLD BALDWIN RD
CITY-ST-ZIP	CALLAHAN, FL 32011
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DENNIS C. RAULERSON
PRESIDENT

Date

1904-879-9658
Daytime Phone #