2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000147219

Entity Name: DEEP SOUTH SURPLUS OF FLORIDA, INC.

FILED Jan 17, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
801 BRICKE SUITE 1450 MIAMI, FL 3					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
801 BRICKELL AVENUE SUITE 1450 MIAMI, FL 33131					
FEI Number: (02-0657846	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
FRONTE, JAMES C 801 BRICKELL AVENUE SUITE 1450 MIAMI, FL 33131 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		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S/D () E DISIERE, FRANC 9692 NORRIS FE SHREVEPORT, L	RRY RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E DUGAN, MICHAE 333 TEXAS ST, S SHREVEPORT, L	STE 725	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T/D () E TROTTER, MICHA 6363 N STATE HI IRVING, TX 7503	WY 161 STE 100	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	P () E ELLERS, RUSSE 2049 CENTURY I LOS ANGELES, O	LL PARK EAST, STE 2700	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () E FRONTE, JAMES 801 BRICKELL A MIAMI, FL 33131	VE, STE 1450	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	HORTON, RÔY V	WY 161 SUITE 100	Title: Name: Address: City-St-Zip:	() Change() Addition	

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: ROY W HORTON AS 01/17/2008