2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000062270

Entity Name: SOUTHERN LIVE OAK HOLDINGS, INC.

FILED Jul 20, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
984 PATRICK DR. WEST PALM BEACH, F	L 33406			
Current Mailing Address:		New Mailing Address:		
PO BOX 6695 WEST PALM BEACH, F	L 33405			
FEI Number: 20-4848236	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
FLOYD, JOSEPH J 984 PATRICK DR WEST PALM BEACH, F	L 33406 US			
The above named entity in the State of Florida.	submits this statement for the p	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				
Electro	nic Signature of Registered Ag	ent	Date	

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRFS Title: PRFS () Delete Title: (X) Change () Addition FLOYD, JOSEPH J FLOYD, JOSEPH J Name: Name: 948 PATRICK DR. Address: 984 PATRICK DR. Address: City-St-Zip: W. PALM BCH, FL 33406 City-St-Zip: W. PALM BCH, FL 33406

Title: S/TR () Delete Title: S/TR (X) Change () Addition
Name: SHANNON BILL ESQ Name: ADRIANNE FLOYD

 Name:
 SHANNON, BILL
 ESQ
 Name:
 ADRIANNE, FLOYD

 Address:
 4500 PGD BLVD
 #304 B
 Address:
 984 PATRICK DRIVE

City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: WEST PALM BEACH, FL 33406

Title: VP (X) Delete Title: () Change () Addition

 Name:
 CRAIG, STEVE ESQ
 Name:

 Address:
 4500 PGA BLVD #304 B
 Address:

 City-St-Zip:
 PALM BEACH GARDENS, FL 33418
 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: JOSEPH J FLOYD PRES 07/20/2009