

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000132994

FILED
Mar 02, 2009
Secretary of State

Entity Name: SOUTHERN CENTRAL IMPORTS, INC.

Current Principal Place of Business:

6094 14TH ST W
#187
BRADENTON, FL 34207

New Principal Place of Business:

Current Mailing Address:

6094 14TH ST W
#187
BRADENTON, FL 34207

New Mailing Address:

FEI Number: 43-2113389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONCELLO, RANDALL C
2033 MAIN SR STE 502
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

CONCELLO, RANDALL
2033 MAIN SR STE 502
SARASOTA, FL 34237 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: DECEASED

03/02/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SCHWANZ, JUDY
Address: 2321 PENNSYLVANIA AVE BOX 5403
City-St-Zip: BRADENTON, FL 34281

Title: DV () Delete
Name: COATES, PHILIP
Address: 2321 PENNSYLVANIA AVE BOX 5403
City-St-Zip: BRADENTON, FL 34281

Title: DST () Delete
Name: SCHWANZ, PHILIP D
Address: 2321 PENNSYLVANIA AVE BOX 5403
City-St-Zip: BRADENTON, FL 34281

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JUDY SCHWANZ

DP

03/02/2009

Electronic Signature of Signing Officer or Director

Date