



# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 27, 2008 8:00 am**  
**Secretary of State**

02-27-2008 90005 014 \*\*\*150.00

<b>DOCUMENT # P07000000053</b> 1. Entity Name <b>SOUTHERN PRIDE TRANSPORT, INC.</b>																											
Principal Place of Business <b>8600 BRADLEY CIRCLE CLERMONT, FL 34711</b>			Mailing Address <b>8600 BRADLEY CIRCLE CLERMONT, FL 34711</b>																								
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.  City & State  Zip      Country		3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip      Country																									
01072008      Chg-P      CR2E034 (12/06)				4. FEI Number      Applied For Not Applicable																							
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent  <b>HOADLEY, BRYAN 8600 BRADLEY CIRCLE CLERMONT, FL 34711</b>																							
7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code				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: _____ DATE: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																							
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td style="width:65%;">PSD</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HOADLEY, BRYAN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>8600 BRADLEY CIRCLE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLERMONT, FL 34711</td> <td></td> </tr> </table>		TITLE	PSD	<input type="checkbox"/> Delete	NAME	HOADLEY, BRYAN		STREET ADDRESS	8600 BRADLEY CIRCLE		CITY-ST-ZIP	CLERMONT, FL 34711											
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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.																											
<b>SIGNATURE:</b> <u>Bry Hoadley</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				2-25-08      352-918-6064 <small>Date      Daytime Phone #</small>																							