

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000034795

FILED
May 02, 2009
Secretary of State

Entity Name: NEW SOUTH INVESTMENT GROUP, INC.

Current Principal Place of Business:

9913 HUNTSMAN PATH
PENSACOLA, FL 32514 US

New Principal Place of Business:

Current Mailing Address:

9913 HUNTSMAN PATH
PENSACOLA, FL 32514 US

New Mailing Address:

FEI Number: 59-1758574 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELMORE, DARRICK K
9913 HUNTSMAN PATH
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

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

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: P () Delete
Name: DIXON, JACK T
Address: 1602 GOVERNORS DRIVE, APT. 2615
City-St-Zip: PENSACOLA, FL 32514 US

Title: VP () Delete
Name: DIXON, JASON W
Address: 22050 PEARSON STREET
City-St-Zip: ROBERTSDALE, AL 36567 US

Title: VP () Delete
Name: LARRABEE, PATRICK N
Address: 1846 N. HIGHWAY 95A
City-St-Zip: CANTONMENT, FL 32533 US

Title: VP () Delete
Name: COMANS, JASON E
Address: 730 PINEY LANE
City-St-Zip: CANTONMENT, FL 32533 US

Title: ST () Delete
Name: ELMORE, DARRICK K
Address: 9913 HUNTSMAN PATH
City-St-Zip: PENSACOLA, FL 32514 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: DIXON, JASON W
Address: 22050 PEARSON STREET
City-St-Zip: ROBERTSDALE, AL 36567 US

Title: P (X) Change () Addition
Name: LARRABEE, PATRICK N
Address: 1846 N. HIGHWAY 95A
City-St-Zip: CANTONMENT, FL 32533 US

Title: P (X) Change () Addition
Name: COMANS, JASON E
Address: 730 PINEY LANE
City-St-Zip: CANTONMENT, FL 32533 US

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: DARRICK K ELMORE

ST

05/02/2009

Electronic Signature of Signing Officer or Director

_____ Date