

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000013203

FILED
Jul 27, 2009
Secretary of State**Entity Name:** SOUTHERN AUCTION MARKETING, INC**Current Principal Place of Business:**15991 NE HWY 27A
WILLISTON, FL 32696**New Principal Place of Business:****Current Mailing Address:**15991 NE HWY 27A
WILLISTON, FL 32696**New Mailing Address:****FEI Number:** 33-1205169**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KULCSAR, JOEL K
15991 NE HWY 27A
WILLISTON, FL 32696 US**Name and Address of New Registered Agent:**SAVOY, WENDY KULCSAR
15991 NE HWY 27A
WILLISTON, FL 32696 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: WENDY KULCSAR SAVOY

07/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: KULCSAR, JOEL K
Address: 15991 NE HWY 27A
City-St-Zip: WILLISTON, FL 32696**Title:** VPD () Delete
Name: SAVOY, WENDY L
Address: 15991 NE HWY 27A
City-St-Zip: WILLISTON, FL 32696**Title:** S/TD () Delete
Name: KULCSAR, SHIRLEY M
Address: 15591 NE HWY 27A
City-St-Zip: WILLISTON, FL 32696**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: KULCSAR, SHIRLEY M
Address: 15991 NE HWY 27A
City-St-Zip: WILLISTON, FL 32696**Title:** VPD (X) Change () Addition
Name: SAVOY, WENDY KULCSAR
Address: 15991 NE HWY 27A
City-St-Zip: WILLISTON, FL 32696**Title:** S/TD (X) Change () Addition
Name: SAVOY, ANTHONY J
Address: 15591 NE HWY 27A
City-St-Zip: WILLISTON, FL 32696

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: SHIRLEY M KULCSAR

PD

07/27/2009

Electronic Signature of Signing Officer or Director

Date