

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

07 AUG -6 PM 3:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Reg 107*

<b>DOCUMENT # P12349</b> 1. Entity Name SOUTHERN DUO-FAST COMPANY, INC.	
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Principal Place of Business 3075 SELMA HWY PO BOX 250130 MONTGOMERY, AL 36125-0130 US	Mailing Address 3075 SELMA HWY P O BOX 250130 MONTGOMERY, AL 36125-0130 US
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2. Principal Place of Business - No P.O. Box # <b>3075 Selma Highway</b> Suite, Apt. #, etc.	3. Mailing Address <b>3075 Selma Highway</b> Suite, Apt. #, etc.
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07112007 Chg-P CR2E034 (12/06)

City & State <b>Montgomery, Alabama</b>	City & State <b>Montgomery, Alabama</b>	4. FEI Number <b>63-0400990</b>	Applied For <input type="checkbox"/> Not Applicable
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Zip <b>36108</b>	Country <b>US</b>	Zip <b>36108</b>	Country <b>US</b>	5. Certificate of Status Desired <b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<b>D</b> <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RUE, WILLIAM H.</b>	NAME	
STREET ADDRESS	<b>3075 SELMA HWY</b>	STREET ADDRESS	
CITY - ST - ZIP	<b>MONTGOMERY, AL</b>	CITY - ST - ZIP	
TITLE	<b>ST</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WELLS, CHARLES M.</b>	NAME	
STREET ADDRESS	<b>3075 SELMA HWY</b>	STREET ADDRESS	
CITY - ST - ZIP	<b>MONTGOMERY, AL</b>	CITY - ST - ZIP	
TITLE	<b>P</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RUE, WILLIAM H. JR.</b>	NAME	
STREET ADDRESS	<b>3075 SELMA HWY</b>	STREET ADDRESS	
CITY - ST - ZIP	<b>MONTGOMERY, AL</b>	CITY - ST - ZIP	
TITLE	<b>VP</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>STEWART III, FRANK M</b>	NAME	
STREET ADDRESS	<b>3075 SELMA HWY</b>	STREET ADDRESS	
CITY - ST - ZIP	<b>MONTGOMERY, AL</b>	CITY - ST - ZIP	
TITLE	<b>D</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RUE, LESLIE W SR</b>	NAME	
STREET ADDRESS	<b>3075 SELMA HWY</b>	STREET ADDRESS	
CITY - ST - ZIP	<b>MONTGOMERY, AL</b>	CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	

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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.

SIGNATURE: *Charles M. Wells* Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR