## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

NATURE AND TYPED OR PRINTED NAME OF

GNING OFFICER OR DIRECTOR

## DOCUMENT # P94000054296 **FILED** 1. Entity Name Jul 28, 2008 08:00 AM SOUTHERN RUSH, INC. **Secretary of State** Mailing Address Principal Place of Business 12292 COUNTY RD 512 P 0 B0X 10 FELLSMERE, FL 32948 US FELLSMERE, FL 32948 No Chg-P 07172008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0521407 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent LILLY, JAMES W JR DO NOT WRITE 537 ALBATROSS TERR SEBASTIAN, FL 32958 IN THIS SPACE 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 egistered agent. المحارية والأمير valure, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 12, 2008 OFFICERS AND DIRECTORS 10. PSTD THILE LILLY, JAMES W JR. NAME 537 ALBATROSS TERR STREET ADDRESS 000000956520 07/28/08-80007-007 150.00 CITY+ST-ZIP SEBASTIAN, FL 32958 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY+ST-ZIP TITLE MAME STREET ADDRESS CITY - ST - 7IP 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 ceth; 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 or 15 like empowered.