

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000066496

FILED
Apr 26, 2007
Secretary of State

Entity Name: SOUTHERN RECONCILIATION SERVICES, INC.

Current Principal Place of Business:

701 PROMENADE DRIVE
230
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

701 PROMENADE DRIVE
230
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number: 65-0685263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAUGHERTY, LISA W
1110 N 76TH AVE
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

WALT, LISA C
1110 N 76TH AVE
PEMBROKE PINES, FL 33024 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: LISA C. WALT

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAUGHERTY, LISA W
Address: 1110 NORTH 76TH AVENUE
City-St-Zip: HOLLYWOOD, FL

Title: VP () Delete
Name: WALT, SUSAN
Address: 2641 GATELY DR. W. #1002
City-St-Zip: W. PALM BEACH, FL

Title: VP () Delete
Name: WEISSMAN, JAN
Address: 1110 N. 76 AVE.
City-St-Zip: HOLLYWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WALT, LISA C
Address: 1110 NORTH 76TH AVENUE
City-St-Zip: HOLLYWOOD, FL

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LISA C. WALT

PRES

04/26/2007

Electronic Signature of Signing Officer or Director

Date