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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P97000059625 (8) DOCUMENT # 1. Corporation Name

SOUTHERN CONSULTING, INC.

FILED Mar 31 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 1335 JAMBALANA LANE 1335 JAMBALANA LANE FORT MYERS FL 33901 FORT MYERS FL 33901 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/07/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible □ No Personal Property Tax due June 30. 24 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CARNER, CARSON 1335 JAMBALANA LANE 82 Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33901 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title (I applicable (NOTE: Registered Agent signature required when rainstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 18 12. 13. Addition DELETE 11 TITLE ☐ Change TITLE CARNER, CARSON 1.2 NAME NAME 1335 JAMBALANA LANE 1.3 STREET ADDRESS STREET ADDRESS FORT MYERS FL 33901 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE CARNER, JULIETTE NAME 2.2 NAME 1335 JAMBALANA LANE 2.3 STREET ADDRESS STREET ADDRESS FORT MYERS FL 33901 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.