

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000082248

FILED
Apr 19, 2005
Secretary of State

Entity Name: SOUTHERN COIN AMUSEMENTS, INC.

Current Principal Place of Business:

1830-A ATLANTA AVE.
ORLANDO, FL 32806

New Principal Place of Business:

930-A FERN STREET
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

1830-A ATLANTA AVE.
ORLANDO, FL 32806

New Mailing Address:

930-A FERN STREET
ALTAMONTE SPRINGS, FL 32701

FEI Number: 59-3472950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, L. WAYNE
1591 LAUREL PARK CT.
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ADAMS, L. WAYNE
Address: 1591 LAUREL PARK CT.
City-St-Zip: ORANGE CITY, FL 32738

Title: D () Delete
Name: SOLOMON, JAMES C JR.
Address: 5155 WHITEWOOD WAY
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: JOHNSON, CALVIN R
Address: 8141-A BRIDGEWATER CT.
City-St-Zip: LAKE CLARK SHORES, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ADAMS, L. WAYNE
Address: 1591 LAUREL PARK CT.
City-St-Zip: ORANGE CITY, FL 32763

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 Section 119.07(3)(i), 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: L WAYNE ADAMS

D

04/19/2005

Electronic Signature of Signing Officer or Director

Date