

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000039314

Entity Name: SOUTHERN MOWERS, INC.

FILED
Jun 11, 2008
Secretary of State

Current Principal Place of Business:

3866 CABBAGE PATCH WAY
LOXAHATCHEE, FL 33470

New Principal Place of Business:

16745 W.SECRETARIET DR.
LOXAHATCHEE, FL 33470

Current Mailing Address:

3866 CABBAGE PATCH WAY
LOXAHATCHEE, FL 33470

New Mailing Address:

16745 W.SECRETARIET DR.
LOXAHATCHEE, FL 33470

FEI Number: 65-0832812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRAGALE, CHERYL A
3866 CABBAGE PATCH WAY
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

FRAGALE, CHERYL A
16745 W.SECRETARIET DR.
LOXAHATCHEE, FL 33470 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: CHERYL FRAGALE

06/11/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: FRAGALE, THOMAS A
Address: 3866 CABBAGE PATCH WAY
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VTD () Delete
Name: FRAGALE, CHERYL A
Address: 3866 CABBAGE PATCH WAY
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: FRAGALE, THOMAS A
Address: 16745 SECRETARIET DR.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VTD (X) Change () Addition
Name: FRAGALE, CHERYL A
Address: 16745 SECRETARIET DR.
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify 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: CHERYL FRAGALE

VTD

06/11/2008

Electronic Signature of Signing Officer or Director

Date