

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000061196

FILED  
Jan 28, 2004  
Secretary of State

Entity Name: SOUTHERN RESOURCE SERVICES, INC.

## Current Principal Place of Business:

11691 GATEWAY BLVD  
#104  
FORT MYERS, FL 33913

## New Principal Place of Business:

## Current Mailing Address:

11691 GATEWAY BLVD  
#104  
FORT MYERS, FL 33913

## New Mailing Address:

FEI Number: 59-3520606

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SARVER, REBECCA  
9233 PINEAPPLE RD  
FORT MYERS, FL 33912 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: PD ( ) Delete  
Name: SARVER, ROBERT L II  
Address: 9233 PINEAPPLE RD  
City-St-Zip: FORT MYERS, FL 33912

Title: ST ( ) Delete  
Name: SARVER, REBECCA  
Address: 9233 PINEAPPLE RD  
City-St-Zip: FORT MYERS, FL 33912

Title: VP ( ) Delete  
Name: SMITH, DAVID  
Address: 18225 RICCARDO RD  
City-St-Zip: FORT MYERS, FL 33912

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ROBERT L SARVER II

PD

01/28/2004

Electronic Signature of Signing Officer or Director

Date