

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90636 039 ***150.00

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AV

DOCUMENT # P99000086034

1. Entity Name
SOUTHALL PROPERTIES, INC.



Principal Place of Business
**4615 JOHN MOORE ROAD
BRANDON FL 33511
US**

Mailing Address
**4615 JOHN MOORE ROAD
BRANDON FL 33511
US**



2. Principal Place of Business

109 Camelot Ridge Dr.

3. Mailing Address

109 Camelot Ridge Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

Brandon FL

City & State

Brandon FL

4. FEI Number **59-3600142**

Applied For

Not Applicable

Zip

33511

Country

USA

Zip

33511

Country

USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SOUTHALL, PAUL S
4615 JOHN MOORE ROAD
BRANDON FL 33511**

7. Name and Address of New Registered Agent

Name **Southall, Paul S.**
Street Address (P.O. Box Number is Not Acceptable)
109 Camelot Ridge Dr.

City **Brandon** **FL** Zip Code **33511**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Paul S. Southall PAUL S. Southall President** **4-15-03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003: Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **SOUTHALL, PAUL S**
STREET ADDRESS **4615 JOHN MOORE ROAD**
CITY-ST-ZIP **BRANDON FL 33511**

TITLE **D** ☒ Delete
NAME **SOUTHALL, MARK H**
STREET ADDRESS **11126 OAK DRIVE**
CITY-ST-ZIP **RIVERVIEW FL 33569**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P/V/S/T/D** ☒ Change ☐ Addition
NAME **Paul S. Southall**
STREET ADDRESS **109 Camelot Ridge Dr.**
CITY-ST-ZIP **Brandon FL 33511**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 report or supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Paul S. Southall PAUL S. Southall** **4-15-03 (813) 346-9100**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)