

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S32006

Entity Name: SOUTHERN ACREAGE, INC.

FILED
Mar 06, 2007
Secretary of State

Current Principal Place of Business:

4401 LAKESIDE DR.
STE 104
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

4401 LAKESIDE DR.
STE 104
JACKSONVILLE, FL 32210 US

New Mailing Address:

FEI Number: 59-3069547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NESBITT, THOMAS, JR.
4401 LAKESIDE DR
#104
JACKSONVILLE, FL 32210 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: NESBITT, THOMAS, JR.,
Address: 4401 HERSCHEL ST #104
City-St-Zip: JACKSONVILLE, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NESBITT, THOMAS, JR.,
Address: 4401 LAKESIDE DRIVE #104
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Change (X) Addition
Name: NESBITT, CATHERINE H
Address: 4401 LAKESIDE DRIVE #104
City-St-Zip: JACKSONVILLE, FL 32210

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS NESBITT

D

03/06/2007

Electronic Signature of Signing Officer or Director

Date