2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S63118

FILED May 06, 2008 Secretary of State

Entity Name: SOUTHERN INSURANCE NETWORK, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
819 SOUTI STE 102	H FEDERAL HV	VY.			
STUART, F	FL 349942952	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	H FEDERAL HV	VY.			
STE 102 STUART, F	FL 349942952	US			
FEI Number:	65-0271240	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SUITE 102 STUART, F	H FEDERAL HV FL 34994 US		surnoso of changing its registers	d office or registered agent, or both,	
in the State	of Florida.	ibinits this statement for the p	dipose oi changing its registere	d office of registered agent, or both,	
SIGNATUF	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP ()[DAHN, LARRY 819 S FEDRAL H STUART, FL 349		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () I DAHN, RICK 819 S FEDRAL H STUART, FL 349		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: LARRY DAHN DP 05/06/2008