

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V09623

FILED  
Apr 02, 2007  
Secretary of State

Entity Name: SOUTHERN PROPERTIES FUND, INC.

**Current Principal Place of Business:**

C/O RICHARD FINKELSTEIN  
1000 CLINT MOORE ROAD SUITE 110  
BOCA RATON, FL 33487

**New Principal Place of Business:**

**Current Mailing Address:**

C/O RICHARD FINKELSTEIN  
1000 CLINT MOORE ROAD SUITE 110  
BOCA RATON, FL 33487

**New Mailing Address:**

FEI Number: 65-0311062      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GRAY, JUDY M  
1000 CLINT MOORE ROAD  
STE 110  
BOCA RATON, FL 33487 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: DV ( ) Delete  
Name: WOHL, MICHAEL D.,  
Address: 9400 S. DADELAND BLVD., STE 100  
City-St-Zip: MIAMI, FL 33156

Title: DPS ( ) Delete  
Name: FINKELSTEIN, RICHARD,  
Address: 1000 CLINT MOORE ROAD STE 110  
City-St-Zip: BOCA RATON, FL 33487

Title: DT ( ) Delete  
Name: ENDELSON, KENNETH,  
Address: 1000 CLINT MOORE ROAD STE 110  
City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Delete  
Name: MATTHEWS-GRAY, JUDY  
Address: 1000 CLINT MOORE RD, STE 110  
City-St-Zip: BOCA RATON, FL 33487

**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:

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 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: RICHARD FINKELSTEIN

DPS

04/02/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date