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FILED
May 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V49196 (1)
1. Corporation Name
SOUTHERN BUILDING, INC.



Principal Place of Business
334 WYMORE RD
#14
ALTAMONTE SPRINGS FL 32714
US

Mailing Address
PO BOX 940219
MAITLAND FL 32794-0219
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 8644 Shenna Ct.
Suite, Apt. #, etc.
22
City & State
23 Orlando, FL
Zip Country
24 32818 25 Orange
2a. Mailing Address
26 8644 Shenna Ct.
Suite, Apt. #, etc.
27
City & State
28 Orlando, FL
Zip Country
29 32818 30 Orange

3. Date Incorporated or Qualified
07/01/1992
4. FEI Number
59-3130247
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JAMERSON, BILL
334 WYMORE RD #104
ALTAMONTE SPRINGS FL 32714

81 Name
Bill Jameson
82 Street Address (P.O. Box Number is Not Acceptable)
8644 Shenna Ct.
83
84 City
Orlando FL 85 Zip Code
32818

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS
TITLE PDST
NAME JAMESON, WILLIAM F., III
STREET ADDRESS 3531 NORWICH CT.
CITY-ST-ZIP CASSELBERRY FL
TITLE VP
NAME JAMERSON, BILL
STREET ADDRESS 334 WYMORE RD #104
CITY-ST-ZIP ALTAMONTE SPRINGS FL
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed on an attachment with an address.

CR2E034 (10/97)