### I hereby 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 all other like empowered. PRESIDENT

## SIGNATURE: NOEL D. ROMER

Electronic Signature of Signing Officer/Director Detail

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


# **Officer/Director Detail :**

Title	V	Title	PRESIDENT
Name	ROMER, SHARON K	Name	ROMER, NOEL D
Address	1224 COMMONWEALTH CIR, UNIT N205	Address	8760 HIDEAWAY HARBOR CT NAPLES FL 34120
City-State-Zip:	NAPLES FL 34116	Ony-State-Zip.	

# **Current Principal Place of Business:**

8760 HIDEAWAY HARBOR CT NAPLES. FL 34120

DOCUMENT# P13000048992

## **Current Mailing Address:**

8760 HIDEAWAY HARBOR CT NAPLES. FL 34120 US

## FEI Number: 61-1714380

## Name and Address of Current Registered Agent:

ROMER, NOEL D 8760 HIDEAWAY HARBOR CT NAPLES, FL 34120 US

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: SOUTHERN PROPERTY MANAGEMENT GROUP INC.

## FILED Apr 27, 2018 Secretary of State CC3967527102

Certificate of Status Desired: Yes

04/27/2018 Date

Date