

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V59069

**Entity Name:** SUDDATH RELOCATION SYSTEMS OF FT. LAUDERDALE, INC.

**Current Principal Place of Business:**

815 S MAIN ST  
ATTN: LORI EISCHEN  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

PO BOX 48088  
ATTN: LORI EISCHEN  
JACKSONVILLE, FL 32247 US

**FEI Number:** 65-0396796

**Certificate of Status Desired:** No

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

BARNETT, JAMES G  
815 S MAIN ST  
JACKSONVILLE, FL 32207 US

*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

**Officer/Director Detail :**

Title            CEOD  
Name            VAUGHN, BARRY S  
Address        815 S MAIN ST  
City-State-Zip: JACKSONVILLE FL 32207

Title            SD  
Name            STRICKLAND, BARBARA S  
Address        815 S MAIN ST  
City-State-Zip: JACKSONVILLE FL 32207

Title            C  
Name            SUDDATH, STEPHEN M  
Address        815 S MAIN ST  
City-State-Zip: JACKSONVILLE FL 32207

Title            VD  
Name            BARNETT, JAMES G  
Address        815 S MAIN ST  
City-State-Zip: JACKSONVILLE FL 32207

Title            P  
Name            MCDONALD, JAMES  
Address        1900 SW 43RD TERRACE  
City-State-Zip: DEERFIELD BEACH FL 33442

*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.*

**SIGNATURE: JAMES G BARNETT**

VD

03/07/2014

Electronic Signature of Signing Officer/Director Detail

Date