

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 26, 2004 08:00 AM
Secretary of State

DOCUMENT # F02000002584

1. Entity Name
SE&M CONSTRUCTORS, INC.



Principal Place of Business
**1110 ATLANTIC AVENUE
ROCKY MOUNT, NC 27801**

Mailing Address
**PO BOX 1320
ROCKY MOUNT, NC 27801**



01212004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-1804334

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BECKETT, WILLIAM A
215 N. EOLA DR.
ORLANDO, FL 32801**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	BYNUM, HARRY L
STREET ADDRESS	PO BOX 1320
CITY - ST - ZIP	ROCKY MOUNT, NC 27801
TITLE	V
NAME	PRICE, JAMES D
STREET ADDRESS	PO BOX 1320
CITY - ST - ZIP	ROCKY MOUNT, NC 27801
TITLE	S
NAME	HOUSE, JANIE
STREET ADDRESS	PO BOX 1320
CITY - ST - ZIP	ROCKY MOUNT, NC 27801
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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01/26/04-80053-013 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Janie House
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-2004
Date

252-977-1155
Daytime Phone #