
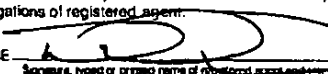
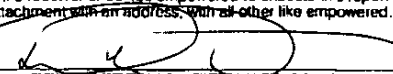


**FILED**  
**Jun 12, 2007 8:00 am**  
**Secretary of State**

05-18-2007 90019 039 \*\*\*150.00

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

<b>DOCUMENT # P01000050719</b>			
1. Entity Name <b>SOUTHEAST GENERAL CONTRACTING AND DEVELOPMENT CORPORATION</b>			
Principal Place of Business <b>2659 S BROCKSMITH ROAD FORT PIERCE, FL 34945</b>		Mailing Address <b>2659 S BROCKSMITH ROAD FORT PIERCE, FL 34945</b>	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
5. Certificate of Status Desired <input type="checkbox"/>		5. FEI Number <b>74-3030147</b>	
		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>RIDOLFO, PHILLIP T JR 2533 COAKLEY PT. WEST PALM BEACH, FL 33411</b>		Name <b>PHILLIP T. RIDOLFO, JR</b>	
		Street Address (P.O. Box Number is Not Acceptable) <b>1300 N. FLORIDA MANGO RD.</b>	
		<b>SUITE 15</b>	
		City <b>WEST PALM BCH</b>	FL Zip Code <b>33409</b>
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 		<b>DONALD C. DUNCAN, PRESIDENT</b>	
		DATE <b>5/3/07</b>	
<b>PLEASE SEE ATTACHED FILE NOW! FEE IS \$350.00 Due by September 14, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
<b>P DUNCAN, DONALD C 2659 S BROCKSMITH RD. FT. PIERCE, FL 34945</b>			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 		<b>6/5/07 772-370-7430</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

*Donald C. Duncan, President*

66018911



05032007 Chg-P CR2E034 (12/06)