

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 21 AM 11:33

DOCUMENT # **P38621** (9)

1. Corporation Name
SOUTHEASTERN CAPITAL CORPORATION

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
1029 SOUTH 22ND STREET 1029 SOUTH 22ND STREET
BIRMINGHAM AL 35205 BIRMINGHAM AL 35205

3. Date Incorporated or Qualified **05/04/1992** 3a. Date of Last Report **03/15/1994**
4. FEI Number **63-0678357** Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 26
Suite, Apt. #, etc. 27
City & State 28
Zip Country 29 30

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	FIELD, PETER W.
STREET ADDRESS	1029 SOUTH 22ND STREET
CITY- ST- ZIP	BIRMINGHAM AL
TITLE	V
NAME	WELDEN, CHARLES V., III
STREET ADDRESS	1029 SOUTH 22ND STREET
CITY- ST- ZIP	BIRMINGHAM AL
TITLE	S
NAME	GRAHAM, TOMMIE J.
STREET ADDRESS	1029 SOUTH 22ND STREET
CITY- ST- ZIP	BIRMINGHAM AL
TITLE	V
NAME	WELDEN, WILLIAM B.
STREET ADDRESS	1029 SOUTH 22ND STREET
CITY- ST- ZIP	BIRMINGHAM AL
TITLE	V
NAME	FIELD, ROBERT C.
STREET ADDRESS	1029 SOUTH 22ND STREET
CITY- ST- ZIP	BIRMINGHAM AL
TITLE	D
NAME	WELDEN, CHARLES V., JR
STREET ADDRESS	1029 SOUTH 22ND STREET
CITY- ST- ZIP	BIRMINGHAM AL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Tommie Graham Skellie
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated in 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 liquidator empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if a change or addition to an officer or director.

SIGNATURE: *[Signature]* 2/15/95 205-250-9000
DATE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR