FILED

2002 Uniform Business Report (UBR)

SIGNATURE:

Apr 03, 2002 8:00 am Secretary of State DOCUMENT # P38621 1. Entity Name 04-03-2002 90178 011 ***150 00 SOUTHEASTERN CAPITAL CORPORATION Principal Place of Business Mailing Address 1029 SOUTH 22ND STREET 1029 SOUTH 22ND STREET BIRMINGHAM AL 35205 BIRMINGHAM AL 35205 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 63-0678357 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required - 6.-Name and Address of Current Registered Agent -7: Name and Address of New Registered Agent " - = Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FL 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 SIGNATURE Signature. Noed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Delete TITLE Change ☐ Addition TITLE NAME FIELD, PETER W. NAME STREET ADDRESS 2040 HIGHLAND AVENUE STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL** CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME WELDEN, CHARLES V., III NAME STREET ADDRESS STREET ADDRESS 2040 HIGLAND AVENUE CITY-ST-ZIE CITY-ST-ZIP **BIRMINGHAM AL** TITLE - Delete TITLE □ Change ☐ Addition NAME NAME SKELLIE, TOMMIE G. STREET ADDRESS 2040 HIGHLAND AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BIRMINGHAM AL Delete ☐ Change ☐ Addition TITLE NAME WELDEN, WILLIAM B. NAME STREET ADDRESS STREET ADDRESS 2040 HIGHLAN AVENUE CITY-ST-ZIP **BIRMINGHAM AL** CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME FIELD, ROBERT C. STREET ADDRESS STREET ADDRESS 2040 HIGHLAND AVENUE CITY-ST-ZIP **BIRMINGHAM AL** CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME WELDEN, CHARLES V., JR NAME STREET ADDRESS STREET ADDRESS 2040 HIGHLAND AVENUE CITY-ST-ZIP CITY-ST-ZIP **BIRMINGHAM AL** 13. I hereby certify that the information supplied with this filing does not qualify to indicated on this report or supplemental report is true and accurate soo that exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information gnature shall have the same legal effect as if made under oath; that I am an officer or director equired by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the reg ver or trustee nt with an add changed, or on an atta-

Date

Daytime Phone #