

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13208

Entity Name: SOUTHEASTERN MEAT ASSOCIATION, INC.

Current Principal Place of Business:

400 CAPITAL CIRCLE SE, SUITE 18270
TALLAHASSEE, FL 32301

Current Mailing Address:

400 CAPITAL CIRCLE SE, SUITE 18270
TALLAHASSEE, FL 32301 US

FEI Number: 59-2642242

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GILBERT, FRANCES M.
400 CAPITAL CIRCLE SE, SUITE 18270
TALLAHASSEE, FL 32301 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: FRANCES M. GILBERT

04/06/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name NETTLES, WILLIAM
Address 190 SW COUNTY RD 240
City-State-Zip: LAKE CITY FL 32025

Title DIRECTOR
Name CARROLL, TOM
Address P.O. BOX 963
City-State-Zip: VALDOSTA GA 31603

Title DIRECTOR
Name FUNKHOUSER, GENE
Address P.O. BOX 340
City-State-Zip: ALACHUA FL 32616

Title PRESIDENT
Name HARRIS, STEVE
Address 7210 CLINTON HWY
City-State-Zip: POWELL TN 37849

Title EXECUTIVE DIRECTOR
Name GILBERT, FRANCES M.
Address 116 DAWN LAUREN LN
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name FITZGERALD, KEN
Address P. O. BOX 1640
City-State-Zip: TUSCALOOSA AL 35403

Title TREASURER
Name LEE, DAVE L.
Address P.O. BOX 204
City-State-Zip: ALMA GA 31510

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANCES M. GILBERT

EXECUTIVE DIRECTOR

04/06/2021

Electronic Signature of Signing Officer/Director Detail

Date