

2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000001438

Entity Name: LEAGUE OF SOUTHEASTERN CREDIT UNIONS, INC.**Current Principal Place of Business:**22 INVERNESS CENTER PKWY STE 200
BIRMINGHAM, AL 35242**Current Mailing Address:**22 INVERNESS CENTER PKWY STE 200
BIRMINGHAM, AL 35242**FEI Number:** 94-3458406**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LA PINE, PATRICK
3692 COOLIDGE CT
TALLAHASSEE, FL 32311 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ARMSTRONG, HENRY
Address 1290 S. DONAHUE DRIVE
City-State-Zip: AUBURN AL 36832

Title PRESIDENT
Name LA PINE, PATRICK
Address 3692 COOLIDGE CT
City-State-Zip: TALLAHASSEE FL 32311

Title IMMEDIATE PAST CHAIR
Name COWANS, ALVIN J
Address PO BOX 593806
City-State-Zip: ORLANDO FL 32859

Title VICE CHAIR
Name JOHNSON, KEVIN
Address 6801 E HILLSBOROUGH
City-State-Zip: TAMPA FL 33610

Title SECRETARY
Name DOWNING, SHARON
Address 3365 S. ALABAMA AVE.
City-State-Zip: MONROEVILLE AL 36460

Title CHAIR ELECTED
Name WILLIAMS, TINA
Address 3150 AIRPORT BLVD
City-State-Zip: MOBILE AL 36606

Title TREASURER
Name SKAGGS, RICK
Address 13302 USF PALM DRIVE
City-State-Zip: TAMPA FL 33612

Title CHAIR ELECT
Name AKIN, BRIAN
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242

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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: BRETT C. BEEMER**CFO****02/21/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BRANCH, STACIE
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242

Title DIRECTOR
Name GREEN, BRAD
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242

Title DIRECTOR
Name HALTER, HANK
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242

Title DIRECTOR
Name LEGGETT, CHRIS
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242

Title DIRECTOR
Name RAPPAPORT, NANCY
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242

Title DIRECTOR
Name HARRIS, ANDY
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242

Title DIRECTOR
Name CLAMPETT, ROBERT
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242

Title DIRECTOR
Name GREENE, CARYL
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242

Title DIRECTOR
Name KELLER, JANET
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242

Title DIRECTOR
Name MCGEE, JOE
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242

Title DIRECTOR
Name WOOD, MARY OTT
Address 22 INVERNESS CENTER PKWY STE 200
City-State-Zip: BIRMINGHAM AL 35242