

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003895

Entity Name: SOUTHEASTERN BANK**Current Principal Place of Business:**1010 NORTH WAY ST
DARIEN, GA 31305**Current Mailing Address:**P.O. BOX 455
1010 NORTH WAY ST
DARIEN, GA 31305 US**FEI Number:** 58-0214350**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRITT, LORRA A
542238 US HWY 1
P. O. BOX 583
CALLAHAN, FL 32011 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:** LORRA A BRITT

01/13/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	HOLLAND , CORNELIUS P III
Address	253 SAINT JAMES AVE
City-State-Zip:	ST. SIMONS ISLAND GA 31522

Title	V
Name	HOUSER, JOHN C
Address	109 HILLCREST COURT
City-State-Zip:	ST. SIMONS ISLAND GA 31522

Title	S
Name	PITTS, WANDA D
Address	1312 ASHANTILLY RD SE
City-State-Zip:	DARIEN GA 31305

Title	DCOO
Name	BEASLEY, ALYSON G
Address	1545 ATWOOD RD SE
City-State-Zip:	TOWNSEND GA 31331

Title	CFO
Name	TORBERT, DONALD J JR.
Address	112 WORTHING RD
City-State-Zip:	ST. SIMONS ISLAND GA 31522

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

SIGNATURE: WANDA D. PITTS**SECRETARY**

01/13/2021

Electronic Signature of Signing Officer/Director Detail

Date