

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 175104

FILED
Jan 14, 2004
Secretary of State

Entity Name: SOUTHEASTERN HOUSEWARES & GIFTS, INC.

Current Principal Place of Business:

1652 EMERSON ST.
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

PO BOX 56256
JACKSONVILLE, FL 32241

New Mailing Address:

FEI Number: 59-0700232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAAS, LOUIS O
9601 SOUTHBROOK DRIVE
#E227
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

ERDELYI, DARLA M V. PRES
1652 EMERSON STREET
JACKSONVILLE, FL 32207 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: DARLA M. ERDELYI

01/14/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: HAAS, LOUIS O,
Address: 9601 SOUTHBROOK DRIVE, #E227
City-St-Zip: JACKSONVILLE, FL 32256

Title: STVP () Delete
Name: ERDELYI, DARLA
Address: 2465 BISHOPS ESTATES RD
City-St-Zip: JACKSONVILLE, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: MATSON, ERIC
Address: 3670 116TH AVENUE NE
City-St-Zip: BELLVUE, WA 98004

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DARLA M. ERDELYI

STVP

01/14/2004

Electronic Signature of Signing Officer or Director

Date