

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90078 034 ***150.00

DOCUMENT # 343145

1. Entity Name
SOUTHEAST PROPERTIES, INC.



Principal Place of Business
**225 NORTHEAST MIZNER BOULEVARD
SUITE 780
BOCA RATON, FL 33432 US**

Mailing Address
**225 NORTHEAST MIZNER BOULEVARD
SUITE 780
BOCA RATON, FL 33432 US**

40013841



2. Principal Place of Business - No P.O. Box #
225 NE MIZNER BLVD
Suite, Apt. #, etc.
SUITE 300
City & State
BOCA RATON FL
Zip
33432 Country
USA

3. Mailing Address
225 NE MIZNER BLVD
Suite, Apt. #, etc.
SUITE 300
City & State
BOCA RATON FL
Zip
33432 Country
USA

02012007 Chg-P CR2E034 (12/06)

4. FEI Number
59-1260640 Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BECK, JEFFREY H
TRUSTEE FOR SOUTHEAST BANKING CORP.
225 NORTHEAST MIZNER BLVD, SUITE 780
BOCA RATON, FL 33432**

7. Name and Address of New Registered Agent

Name
Beck, Jeffrey A. Trustee for SE Banking Corp
Street Address (P.O. Box Number is Not Acceptable)
225 NE MIZNER BLVD
SUITE 300
City
BOCA RATON FL Zip Code
33432

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Jeffrey H. Beck, Pres.

2/5/07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVP BECK, JEFFREY H 225 NORTHEAST MIZNER BLVD, SUITE 780 BOCA RATON, FL 33432	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BECK, JEFFREY H 225 NORTHEAST MIZNER BLVD, SUITE 780 BOCA RATON, FL 33432	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAVP Beck, Jeffrey A. 225 NE MIZNER BLVD SUITE 300 BOCA RATON FL 33432	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Beck, Jeffrey H. 225 NE MIZNER BLVD SUITE 300 BOCA RATON FL 33432	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeffrey H. Beck, Pres.

2/5/07

*561-620
7177*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #