FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 361811

(3)

SOUTHEASTERN RESOURCES INC

FILED
May 16 1997 8:00am
Secretary of State

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Principal Place 1301 RIVERPLA SUITE 1901 JACKSONVILLE	CE BLVD	Mailing Address 1301 RIVERPLACE BLVD SUITE 1901 JACKSONVILLE FL 32207-9062		· · · · · · · · · · · · · · · · · · ·				,	
		U\$	us		3. Date Incorporated or Qualified	1	e of Last		
2. Principal Pi	ace of Business	2a. Mailing Address		J	03/30/1970 4. FEI Number	1 04/	10/1996	Applied For	
	Riverplace Blud	26 1301 Kider Ali	GCP	Blvd	59-1315755		<u></u>	vot Applicable	;-
Suite, Apt.	#, etc.	26 1301 K: Verple Stute, Apt #, etc. 27 Suit- Apt # 700	<u> </u>		5. Certificate of Status Desired		\$8.75	Additional Required	
City & State		City & State 28 Jackson VIII-	c.F.	 	Election Campaign Financing Trust Fund Contribution			May Be	1
Zip 322	07 Country	29 32207 30	_ Clountry	1	8. This corporation has liability for i		ax under] No	s. 199.032,	
	9. Name and Address of Current		J		10. Name and Address of New Re				-
I AN	DAU FRANCINE CLAIR ESQ		81	Name					7
1301	I RIVERPLACE BLVD		82	Street Add	dress (P.O. Box Number is Not Acceptab	le)			-
	KSONVILLE FL 32207		83	ļ.,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1
	•		84	Cily		FL	85 Zip	Code	1
office or re	to the provisions of Sections 607.0502 egisterod agent, or both, in the State on m familiar with, and accept the obliga	of Florida. Such change was auth	orized by	the corpora	rporation submits this statement for the pation's board of directors. I hereby accep	urpose of t the appo	changing pintment a	its registered is registered	
SIGNATURE	Signature, typed or printed name of registered agen	NOW 5	tralitarist		Jred when teinstating)	F2.434		· · · · · ·	1
12.	OFFICERS AND		13.	in synamic req.	ADDITIONS/CHANGES TO OFFIC	DAIL ERS AND	DIRECTO	DRS IN 12	1
TITLE	С	DELLTE	1.1 TITLE		,		Change		
NAME	KING, JR., JAMES E.		1.2 NAME						3
STREET ADDRESS	13724 PLEASANT VALLY DR		13 STHEET	ADDRESS					200
CITY-ST-ZIP	JACKSONVILLE FL		1.4 D/TY-S	1 - ZIP					<u>.]</u> [
TITLE	PST	☐ DELETE	2.1 1/11/1				Change	Addition	10
NAME	STEVENSON, RALPH C		2.2 NAME						1
STREET ADDRESS	103 OAKWOOD RD		2.3 \$TREE1	ADDRESS					-
CITY-ST-ZIP	JACKSONVILLE, FL 00000		2 4 CITY-	S1 - 71P					_
TITLE	V	DCLETE	3.1 TITLE				Change	Addition	
NAME	WHIPPLE, PAULA E.		3.2 NAME						-
STREET ADDRESS	6333 CUSTER ROAD	J	3.3 \$TREET						
CITY-ST-ZIP TITLE	ORANGE PARK FL	DELETI	34 CITY 5	51 · 71P	····		Change	Addition	-
NAME		txtt	4. 2 NAME				Unange (E-1 Addition	
STREET ADDRESS			4.2 NAME 4.3 STREET	VIUVBL CC					
CITY-ST-ZIP			4.4 GITY - S	- 1					
TITLE		DELETE	51 BILE	1.411			Change	Addition	1
NAME		`	5.2 NAME						
STREET ADDRESS		ļ	5.3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 OITY - S	ì					Ì
THTLE		☐ DILE1L	6.1 1111.5				Change	Addition	1
NAME			62 NAME	}					
STREET ADDRESS		j	63 STREET	ADDRESS					
CITY-ST-ZIP			64.CJTY - S	1-7IP					1
14. I do heret	by certify that the information supplied	with this filing does not qualify for	or the exc	mption state	ed in Section 119.07(3)(i). Florida Statute:	s. I further	certify tha	at the inder path: the	

intormation indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under or lam an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an appelimentally an address.

GNATURE:

4/18/47

994-58-546

SIGNATURE: