

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 08, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 519766**

1. Entity Name  
ROGERS SOUTHEAST ASSOCIATES, INC.



Principal Place of Business

14700 NW 44TH CT  
PO BOX 10  
REDDICK, FL 32686

Mailing Address

P.O. BOX 10  
REDDICK, FL 32686



01042008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-1708076

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

ROGERS, STEVEN K.  
14700 NW 44TH CT  
ROCKY TOP FARM  
REDDICK, FL 32686

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	ROGERS, SCOT E
STREET ADDRESS	4015 OAK HARBOR DR. NORTH
CITY-ST-ZIP	GAINESVILLE, GA
TITLE	VC
NAME	ROGERS, STEVEN K
STREET ADDRESS	14700 N.W. 44TH COURT
CITY-ST-ZIP	REDDICK, FL
TITLE	T
NAME	ROGERS, CYNTHIA L
STREET ADDRESS	14700 N.W. 44TH COURT
CITY-ST-ZIP	REDDICK, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000775384  
01/08/08-80028-007 150.00

**DO NOT WRITE  
IN THIS SPACE**

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: Steven K. Rogers**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/08

Date

352-591-1296

Daytime Phone #