

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715456

FILED
Jan 25, 2011
Secretary of State

Entity Name: SOUTHEASTER, INC.

Current Principal Place of Business:

4841 SAXON DRIVE
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

4841 SAXON DRIVE
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

FEI Number: 59-1274519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENNETT, ARNIE
4841 SAXON DR
NEW SMYRNA BEACH, FL 32169 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: HEWITT, BENJAMIN
Address: 4841 SAXON DRIVE A105
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP
Name: MELTON, FRANK
Address: 4841 SAXON DRIVE F103
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: TREA
Name: DYMOWSKI, ROBERT
Address: 4841 SAXON DRIVE B106
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: SEC
Name: ZELL, ROBERT
Address: 4841 SAXON DRIVE F206
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: DIR
Name: SMITH, TOM
Address: 4841 SAXON DRIVE B105
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: DIR
Name: HOWARD, STEVE
Address: 4841 SAXON DRIVE D204
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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

SIGNATURE: BENJAMIN HEWITT

PRES

01/25/2011

Electronic Signature of Signing Officer or Director

Date