2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#718381

FILED Apr 29, 2005 Secretary of State

Entity Name: SOUTHEASTERN CONFERENCE ON LINGUISTICS, INC.

Current Principal Place of Business:

New Principal Place of Business:

DEPT. OF ENGLISH, UNC CHARLOTTE 9201 UNIVERSITY CITY BLVD CHARLOTTE, NC 282230001 US

CTR. FOR DIVERSITY & RACE RELATIONS 243 FOY UNION BLDG., AUBURN UNIV.

AUBURN, AL 368495140 US

Current Mailing Address:

New Mailing Address:

DEPT. OF ENGLISH, UNC CHARLOTTE 9201 UNIVERSITY CITY BLVD CHARLOTTE, NC 282230001 US

CTR. FOR DIVERSITY & RACE RELATIONS 243 FOY UNION BLDG., AUBURN UNIV.

AUBURN, AL 368495140 US

TRAMMELL, ROBERT L DR.

801 SKY PINE WAY

FEI Number: 62-1188009

TRAMMELL, ROBERT L

FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

18912 CANDLEWICK DR BOCA RATON, FL 334965002 US

APT. C-1

GREENACRES, FL 334159022 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: ROBERT L. TRAMMELL

04/29/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DST () Delete

THIEDE, RALF Name:

DEPT. OF ENGLISH, UNC CHARLOTTE Address:

City-St-Zip: CHARLOTTE, NC 282230001 US

Title: PD () Delete DAVIES, CATHERINE E Name:

Address: DEPT OF ENG. BOX 870244 U OF AL

City-St-Zip: TUSCALOOSA, AL 354870244

Title: VD. () Delete DYER, DONALD L Name:

DEPT MOD LANGS, BOX 1848 U OF MS Address:

City-St-Zip: OXFORD, MS 386771848

Title: () Delete Name: BAPTISTA, MARLYSE

LINGUISTICS PROG, 33Y PARK HALL U OF GA Address:

City-St-Zip: ATHENS, GA 306026205

Title: () Delete PANDEY, ANITA Name:

APPLIED LING, 202 HOLMES HALL MORGAN ST Address:

BALTIMORE, MD 212510001 City-St-Zip:

Title: () Delete BLACKWELL, ALEKA Name:

Address: DEPT. OF ENGLISH, MIDDLE TN SU MURFREESBORO, TN 37132 City-St-Zip:

(X) Change () Addition

SABINO, ROBIN DR. Name:

Address: 243 FOY UNION BLDG., AUBURN UNIV.

City-St-Zip: AUBURN, AL 368495140 US

Title: (X) Change () Addition

Name: MELANÇON, MEGAN E DR.

Address: DEPT. OF ENGL., CBX 044, GA COLL. & SU

City-St-Zip: MILLEDGEVILLE, GA 310610490 US

Title: (X) Change () Addition

Name: DYER, DONALD L DR.

DEPT MOD LANGS, BOX 1848 U OF MS Address:

City-St-Zip: OXFORD, MS 386771848 US

Title: (X) Change () Addition

JOHNSON, ELLEN DR. Name:

DEPT. OF ENGLISH, BOX 490350, BERRY COLL. Address:

City-St-Zip: MOUNT BERRY, GA 301490350 US

Title: (X) Change () Addition

CARTER, PHILLIP M MR. Name:

DEPT. OF ENGL, BOX 8105, NCSU Address: RALEIGH, NC 276958105 US City-St-Zip:

Title: (X) Change () Addition

ABNEY, LISA DR. Name:

Address: BOX 3663, LA FOLKLIFE CTR., NW SU OF LA

NATCHITOCHES, LA 714973663 US City-St-Zip:

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

SIGNATURE: RALF THIEDE D 04/29/2005