

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718381

FILED
Apr 02, 2010
Secretary of State

Entity Name: SOUTHEASTERN CONFERENCE ON LINGUISTICS, INC.

Current Principal Place of Business:

9030 HALEY CENTER
AUBURN UNIVERSITY
AUBURN, AL 36849 US

New Principal Place of Business:

Current Mailing Address:

9030 HALEY CENTER
AUBURN UNIVERSITY
AUBURN, AL 36849 US

New Mailing Address:

FEI Number: 62-1188009 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TRAMMELL, ROBERT L DR.
801 SKY PINE WAY
APT. C-1
GREENACRES, FL 334159022 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: D/T
Name: SABINO, ROBIN DR.
Address: 9030 HALEY CENTER, AUBURN UNIVERISTY
City-St-Zip: AUBURN, AL 368495140 US

Title: D/S
Name: MELANĪŹON, MEGAN E DR.
Address: DEPT. OF ENGL., CBX 044, GA COLL. & SU
City-St-Zip: MILLEDGEVILLE, GA 310610490 US

Title: D/P
Name: ABNEY, LISA DR.
Address: NORTHWESTERN STATE UNIVERSITY OF LOUISIANA
City-St-Zip: NATCHITOCHES, LA 71457 US

Title: D/PP
Name: BURKETTE, ALLISON DR.
Address: BONDURANT HALL W2 UNIVERSITY OF MISSISSIPP
City-St-Zip: UNIVERSITY, MS 38677 US

Title: D/M
Name: REASER, JEFF
Address: NORTH CAROLINA STATE UNIVERSITY, BOX 8105
City-St-Zip: RALEIGH, NC 27695 US

Title: D/M
Name: MALLINSON, CHRISTINE DR.
Address: UNIVERSITY OF MARYLAND, BALTIMORE COUNTY
City-St-Zip: BALTIMORE, MD 21223 US

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: ROBIN SABINO

DR.

04/02/2010

Electronic Signature of Signing Officer or Director

Date