2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 744271 1. Entity Name

SOUTHEASTERN CONFERENCE FOR PUBLIC



FILED Apr 23, 2007 8:00 am Secretary of State

04-23-2007 90068 022 ****70.00

Sire t Address (P.O. Box Number is Not Acceptable) 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 act the obligations of registered agent and title d applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5. Certificate of Status Desired \$8. To Additional Fee Required 7. Name and Address of New Registered Agent 8. Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 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 act the obligations of registered agent and title d applicable NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to	plied For A Applicable litional d
HOLLYWOOD FL 33021 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, otc.	plied For A Applicable litional d
2. Principal Place of Business - No P.O. Box # 3. Mailing Addross Suite. Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number 59-2639543	plied For A Applicable litional d
City & State Country See The Address of Status Desired The Registered Agent To Name and Address of New Registered Agent Name FRANK, HOWARD A 4000 N HILLS DR #31 HOLLYWOOD FL 33021-2443 City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code See The above named ontity 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 act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligations of registered agent and title if apphase in the familiar with and act the obligation of registered agent and title if app	at Applicable iitional d
Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FRANK, HOWARD A 4000 N HILLS DR #31 HOLLYWOOD FL 33021-2443 City FL Zip Code 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 actine obligations of registered agent, yped or printed fame of registered agent and title if applicable FILE NOW: FEE* IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to	at Applicable iitional d
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Due By May 1, 2007 Trust Fund Contribution. U Added to Fees Florida Department of State	
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
NAME HANDLEY, DONNA Delete TITT Change A	Addition
SIRET ADDRESS 4238 1212 UNIVERSITY BLVD SIRET ADDRESS	
CITY ST ZIP BIRMINGHAM AL 35294 CITY ST ZIP	
TITLE P Delete TITLE P Claire Noste! Change VA	Addition
NAME TAYLOR, MARY STREEL ADDRESS STE 105 STUDENT SERVICES SIRIEL ADDRESS Miami, FL 33179	_
STREEL ADDRESS STE 105 STUDENT SERVICES SIRIEF ADDRESS MIGHT, FL 33/79	
CITY ST /IP KNOXVILLE TN 37996-0213 CITY-ST-/IP	'
TITLE D Change A	■ Addition
NAME XAYPANGPA, PHIN NAME	
SIRET ADDRESS 600 EAST FOURTH ST CITY-SI-7/P CHARLOTTE NC 28214	
OTALOTTE NO 20214	
	Addition
THANK, NOTABLE	
SHEET ADDRESS CHY SE ZIP HOLLYWOOD FL 33021 SIRIET ADDRESS CHY SE ZIP CHY SE ZIP	
	Addition
NAME BUCKELEW, HELEN R NAME	
STREET ADDRESS 10870 BIG CANOE STREET ADDRESS	
CITY-ST-7/P BIG CANOE GA 30143-5137 CITY-ST-7/P	
IITE Delete IITE Change A	Addition
NAME NAME	
STREET ADDRESS STREET ADDRESS	
CITY-ST-ZIP CITY-	

i noreby cortify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUMME AND THE STORE AND THE STORE

HOWARD A. FRAUK 4/9/07
NAME OF SIGNING OFFICER OF DIRECTOR

954.964.1/47