2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744271

FILED Jan 06, 2009 Secretary of State

Entity Name: SOUTHEASTERN CONFERENCE FOR PUBLIC ADMINISTRATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4000 N HILLS DR #31 6000 SW 26TH STREET HOLLYWOOD, FL 33021 US MIAMI, FL 33155 US

Current Mailing Address: New Mailing Address:

4000 N HILLS DR #31 6000 SW 26TH STREET HOLLYWOOD, FL 33021 US MIAMI, FL 33155 US

FEI Number: 59-2639543 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:

FRANK, HOWARD A
4000 N HILLS DR #31
HOLLYWOOD, FL 330212443 US

MICHAEL, CAPOTE
6000 SW 26TH STREET
MIAMI, FL 33155 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: MICHAEL CAPOTE 01/06/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: () Change () Addition Name: HOFFMAN, KIM Name:

 Name:
 HOFFWAN, KIWI
 Name:

 Address:
 201 DONAGKEY AVENUE
 Address:

 City-St-Zip:
 CONWAY, AR 72035
 City-St-Zip:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 STEWART, KENDRA B
 Name:
 STEVE, CONDREY

Address: 521 LANCASTER AVE. Address: 465 SHOSHONE DRIVE
City-St-Zip: RICHMOND, KY 40475 City-St-Zip: MONTEVALLO, AL 35115

Title: T () Delete Title: T (X) Change () Addition

 Name:
 FRANK, HOWARD
 Name:
 MICHAEL, CAPOTE

 Address:
 4000 N HILLS DR #31
 Address:
 6000 SW 26TH STREET

 City-St-Zip:
 HOLLYWOOD, FL 33021
 City-St-Zip:
 MIAMI, FL 33155

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MICHAEL CAPOTE T 01/06/2009