

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 31, 2003 8:00 am**  
**Secretary of State**

03-31-2003 90162 009 \*\*\*\*61.25

**DOCUMENT # 744271**

1. Entity Name  
**SOUTHEASTERN CONFERENCE FOR PUBLIC ADMINISTRATIO  
N, INC.**



Principal Place of Business

**4000 N HILLS DR #31  
HOLLYWOOD FL 33021  
US**

Mailing Address

**4000 N HILLS DR #31  
HOLLYWOOD FL 33021  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2639543**

Applied For

Not Applicable

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**

Name

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 accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Delete  
NAME **HINSHAW, MARY ANN**  
STREET ADDRESS **P O BOX 38**  
CITY-ST-ZIP **HALIFAX NC 27839**

TITLE **Kathryn Hensley, VP** ☐ Change ☒ Addition  
NAME **104 Parkview Ct.**  
STREET ADDRESS **Lexington, SC 29072**  
CITY-ST-ZIP

TITLE **VP** ☒ Delete  
NAME **GROSS, HARRY**  
STREET ADDRESS **903 MICHIGAN BLVD**  
CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE **Thomas Lynch, P** ☐ Change ☒ Addition  
NAME **3200 CEBA, LSU**  
STREET ADDRESS **Baton Rouge, LA 70808**  
CITY-ST-ZIP

TITLE **D** ☒ Delete  
NAME **RAINEY, GLENN W JR**  
STREET ADDRESS **113 MCCREARY HALL**  
CITY-ST-ZIP **RICHMOND KY 40475-3102**

TITLE **Steven Hays, D** ☐ Change ☒ Addition  
NAME **Univ of South Carolina**  
STREET ADDRESS **Gambrell Hall**  
CITY-ST-ZIP **Columbia, SC 29208**

TITLE **D** ☒ Delete  
NAME **CUNNINGHAM, BOB**  
STREET ADDRESS **POLITICAL SCIENCE DEPT. UNIV. OF TENN.**  
CITY-ST-ZIP **KNOXVILLE TN**

TITLE **John Topinka** ☐ Change ☒ Addition  
NAME **Miami Dade Housing Agency**  
STREET ADDRESS **1401 NW 7th St.**  
CITY-ST-ZIP **Miami, FL 33125**

TITLE **T** ☐ Delete  
NAME **FRANK, HOWARD**  
STREET ADDRESS **4000 N HILLS DR #31**  
CITY-ST-ZIP **HOLLYWOOD FL 33021**

TITLE **Steven Bobes** ☐ Change ☒ Addition  
NAME **1625 SW 83rd Ave**  
STREET ADDRESS **Miami, FL 33155**  
CITY-ST-ZIP

TITLE **D** ☒ Delete  
NAME **STRONG, DENISE**  
STREET ADDRESS **COLLEGE OF URBAN PUBLIC AFFAIRS UNIV NO**  
CITY-ST-ZIP **NEW ORLEANS LA 70148**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Howard A. Frank* **RECHOWARD Frank**

*3/16/03* **305-349-1254**

CR2E037 (10/02)