

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Nov 13, 2008
Secretary of State**

DOCUMENT# 755901

Entity Name: SOUTHEASTERN CONFERENCE ASSOCIATION OF SEVENTH-DAY ADVENTISTS, INCORPORATED**Current Principal Place of Business:**1701 ROBIE AVENUE
MT. DORA, FL 32756**New Principal Place of Business:**1701 ROBIE AVENUE
MT. DORA, FL 32757**Current Mailing Address:**1701 ROBIE AVENUE (32757-6339)
P.O. BOX 1016
MT. DORA, FL 32756**New Mailing Address:**1701 ROBIE AVENUE (32757-6339)
P.O. BOX 1016
MT. DORA, FL 32757

FEI Number: 59-2066139

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:MOREL, HUBERT J JR.
1701 ROBIE AVENUE
MT. DORA, FL 32757 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: S () Delete
Name: PATRICK, VINCENT E
Address: 1701 ROBIE AVENUE
City-St-Zip: MT. DORA, FL 32757Title: T () Delete
Name: PARKER, GWENDOLYN T
Address: 1701 ROBIE AVENUE
City-St-Zip: MT. DORA, FL 32757Title: D () Delete
Name: BRISE, RONALD
Address: 80 NE 135TH STREET
City-St-Zip: N. MIAMI, FL 33161Title: PC () Delete
Name: MOREL, HUBERT J JR.
Address: 1701 ROBIE AVENUE
City-St-Zip: MT. DORA, FL 32757Title: D () Delete
Name: ADAMS, EVELYN
Address: 1914 W. 10TH STREET
City-St-Zip: JACKSONVILLE, FL 32209Title: D () Delete
Name: ARCHER, JOSEPH
Address: 721 INDIANA AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33312**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: S (X) Change () Addition
Name: MACK, GREGORY O
Address: 1701 ROBIE AVENUE
City-St-Zip: MT. DORA, FL 32757Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
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City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HUBERT J. MOREL, JR.

PC

11/13/2008

Electronic Signature of Signing Officer or Director

Date