

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 842659 (5)

1. Corporation Name
SOUTHEASTERN PARTNERS, INCORPORATED

Principal Place of Business

~~P O BOX 160306~~
~~MOBILE AL 36616~~

Mailing Address

P O BOX 160306
MOBILE AL 36616

FILED
Apr 30 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Colonial Bank Centre		26		02/23/1979	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 41 North Beltline Highway		27		63-0768412	
City & State		City & State		Applied For	
23 Mobile, AL		28		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 36608-1201		29		<input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25		30		<input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
DICKSON, MAX L.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
7200 NORTH AVE					
SUITE 6					
PENSACOLA FL 32504					

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	3298 Summit Blvd. #18
83	
84 City	Pensacola, FL
85 Zip Code	32503-4350

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DICKSON, MAX L.	1.2 NAME	
STREET ADDRESS	851 BELTLINE HWY. S.	1.3 STREET ADDRESS	41 North Beltline Highway
CITY - ST - ZIP	MOBILE AL	1.4 CITY - ST - ZIP	Mobile, AL 36608-1201
TITLE	PO	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAINT, JOHN B.	2.2 NAME	
STREET ADDRESS	851 BELTLINE HWY.	2.3 STREET ADDRESS	41 North Beltline Highway
CITY - ST - ZIP	MOBILE AL	2.4 CITY - ST - ZIP	Mobile, AL 36608-1201
TITLE	S	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WESCH, PAUL C.	3.2 NAME	
STREET ADDRESS	851 BELTLINE HWY., S.	3.3 STREET ADDRESS	41 North Beltline Highway
CITY - ST - ZIP	MOBILE AL	3.4 CITY - ST - ZIP	Mobile, AL 36608-1201
TITLE	T	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ISHEE, WILLIAM H.	4.2 NAME	
STREET ADDRESS	851 BELTLINE HWY.	4.3 STREET ADDRESS	41 North Beltline Highway
CITY - ST - ZIP	MOBILE AL	4.4 CITY - ST - ZIP	Mobile, AL 36608-1201
TITLE	VO	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEFAN, CHESTER J.	5.2 NAME	
STREET ADDRESS	851 BELTLINE HWY.	5.3 STREET ADDRESS	41 North Beltline Highway
CITY - ST - ZIP	MOBILE AL	5.4 CITY - ST - ZIP	Mobile, AL 36608-1201
TITLE	D	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLY JR, DONALD P	6.2 NAME	
STREET ADDRESS	851 BELTLINE HWY. S.	6.3 STREET ADDRESS	41 North Beltline Highway
CITY - ST - ZIP	MOBILE AL	6.4 CITY - ST - ZIP	Mobile, AL 36608-1201

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CP2E034 (10/97)

44 94 08 6226 2001 99 90

Southeastern Partners, Incorporated
F.E.I.# 63-0768412
Officers & Directors

<u>Title</u>	<u>Name</u>	<u>Complete Business Address</u>
Asst. Secretary	Chester J. Stefan	Colonial Bank Centre, 41 North Beltline Highway, Mobile, AL 36608-1201