

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2008 08:00 AM
Secretary of State

DOCUMENT # 858471

1. Entity Name
**SOUTHEASTERN CENTER FOR ELECTRICAL
ENGINEERING EDUCATION, INC.**



Principal Place of Business

**1101 MASSACHUSETTS AVENUE
ST. CLOUD, FL 34769**

Mailing Address

**1101 MASSACHUSETTS AVENUE
ST. CLOUD, FL 34769**



01222008 No Chg-NP

CR2E037 (4/06)

4. FEI Number

23-7365171

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**EVERETT, WOODROW W JR
% GAR MEMORIAL HALL
1101 MASSACHUSETTS AVE
ST. CLOUD, FL 34769**

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000831378
02/27/08-80016-003 70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MARSHAK, A. H. 1101 MASSACHUSETTS AVE. ST. CLOUD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DEVGAN, S S 1101 MASSACHUSETTS AVE ST CLOUD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVERETT, WOODROW W JR 1101 MASSACHUSETTS AVE SAINT CLOUD, FL 34769
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Woodrow W. Everett, Jr., Director

2/14/2008

(804) 742-5611