2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004367

FILED Aug 13, 2007 Secretary of State

Entity Name: BROKER'S FINANCIAL SERVICES SOUTHEAST, INC.

Current Principal Place of Business:		New Principal Place of Business:		
9500 MIC SUITE 360 IVONIA, I		AD		
Current Mailing Address:		New Mailing Address:		
4499 N. [SUITE 215 AMPA, F				
El Number	20-1906713	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
		SUTIE 215 SOUTH		
AIVIFA, I	L 33016 U	3		
he above			purpose of changing its registere	ed office or registered agent, or both,
he above	named entity e of Florida.		purpose of changing its registere	ed office or registered agent, or both,
he above the State	named entity e of Florida. RE:			ed office or registered agent, or both, Date
The above on the State SIGNATUI	named entity e of Florida. RE: Electror ce with s. 607.19	submits this statement for the nic Signature of Registered Agra(3(2)(b), F.S., the corporation did n	ent	
he above the State SIGNATUI accordan section Car	named entity e of Florida. RE: Electror ce with s. 607.19	submits this statement for the nic Signature of Registered Ag (3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ent ot receive the prior notice.	
he above the State SIGNATUI accordan section Car	named entity e of Florida. RE: Electror ce with s. 607.19 npaign Financin S AND DIREC DPT (HORTON, GER	submits this statement for the nic Signature of Registered Ag (3(2)(b), F.S., the corporation did n g Trust Fund Contribution (). TORS: Delete ALD W MABRY, SUITE 215 SOUTH	ent ot receive the prior notice.	Date
The above the State of the Stat	named entity of of Florida. RE: Electron ce with s. 607.19 mpaign Financin S AND DIREC DPT (HORTON, GER 14499 N. DALE TAMPA, FL 33 S (HORTON, SUS	submits this statement for the nic Signature of Registered Ag (3(2)(b), F.S., the corporation did n g Trust Fund Contribution (). TORS:) Delete (ALD W E MABRY, SUITE 215 SOUTH 618) Delete AN M E MABRY, SUITE 215 SOUTH	ent ot receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERALD W. HORTON PRES 08/13/2007