2006 FOR PROFIT CORPORATION

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT DOCUMENT #F35211 1. Entity Name SOUTH EAST TELEPHONE SALES AND SERVICE



FILED Apr 17, 2006 08:00 AM Secretary of State

INCORPORATED Principal Place of Business

Mailing Address

606 NEWCASTLE

606 NEWCASTLE

FT WALTON BCH, FL 32547-2456

FT WALTON BCH, FL 32547-2456



01312006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2091718

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

PELFREY, G.W. 20 ELEVENTH STREET SHALIMAR, FL 32579

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.				
SIGNATURE				
Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when relocating)				
File NOWIN FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 7. Election Campaign Finance Trust Fund Contribution.			\$5.00 May Be Added to Fees	000000513282 04/29/06-80121-016 150.80
10. OFFICERS AND DIRECTOFS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PELFREY, GEORGE W 20 ELEVENTH STREET SHALIMAR, FL 32579			: :
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST VIGARE, JEANNE 1863 WHISPERING OAKS LANE FORT WALTON BEACH, FL 32547			; ;
TITLE NAME STREET AUDRESS CITY-ST-ZIP	VPD PELFREY, NORA 20 ELEVENTH STREET SHALIMAR, FL 32579		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-DP			IN T	THIS SPACE
TITLE MAME STREET ADDRESS CITY-SI-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				· :
12. I hereby certify that the information supplied with this filling 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 calls; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				

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