

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F35211

FILED  
Apr 12, 2007  
Secretary of State

**Entity Name:** SOUTH EAST TELEPHONE SALES AND SERVICE INCORPORATED

**Current Principal Place of Business:**

606 NEWCASTLE  
FT WALTON BCH, FL 325472456

**New Principal Place of Business:**

**Current Mailing Address:**

606 NEWCASTLE  
FT WALTON BCH, FL 325472456

**New Mailing Address:**

**FEI Number:** 59-2091718

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PELFREY, GEORGE W,  
Address: 20 ELEVENTH STREET  
City-St-Zip: SHALIMAR, FL 32579

Title: ST ( ) Delete  
Name: VIGARE, JEANNE  
Address: 1863 WHISPERING OAKS LANE  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: VPD ( ) Delete  
Name: PELFREY, NORA  
Address: 20 ELEVENTH STREET  
City-St-Zip: SHALIMAR, FL 32579

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 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:** JEANNE VIGARE

ST

04/12/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date