

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **K22147**

1. Entity Name
SOUTHEAST DIVERSIFIED, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUL 27 AM 8:24

Principal Place of Business Mailing Address
% KENNETH R. ZARRILLO SR % KENNETH R. ZARRILLO SR
5085 FLORENTINE CT. 5085 FLORENTINE CT.
SPRING HILL FL 34608 SPRING HILL FL 34608



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State 4. FEI Number **59-2892877** Applied For
Not Applicable

Zip Country Zip Country 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZARRILLO, KENNETH R. SR
5085 FLORENTINE CT
SPRING HILL FL 34605

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State.

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZARRILLO, KENNETH A. SR. 5085 FLORENTINE CT. SPRING HILL FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BISHOP, JOHN J 11333 MURCOTT WY LAND O' LAKES FL 34639 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ZARRILLO, JOANNE 5085 FLORENTINE CT SPRINGHILL FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ZARRILLO, JOANNE 5085 FLORENTINE CT SPRINGHILL FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000003349970--8 -08/08/00--01095--010 ***150.00 ***150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **7-17-00** Daytime Phone #: **352 688 2920**

CR2E034 (5/00)

Southeast Diversified, Inc.
5085 Florentine Court
Spring Hill, Florida 34608

July 17, 2000

Division of Corporations
Uniform Business Report Filings
P.O. 1500
Tallahassee, Florida 32302

RE: Southeast Diversified, Inc.

Gentlemen:

I am in receipt of the second notice for the filing of the Uniform Business Report.

Please note that I completed and mailed the initial request on April 18, 2000 together with my check in the amount of \$150.00 drawn payable to your office.

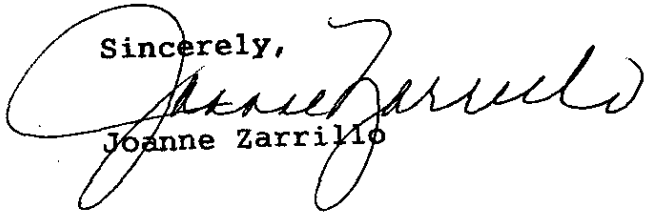
Immediately upon my receipt of this second report, I contacted my bank and have learned that the check still remains outstanding as of today.

I contacted your office and explained the situation to an employee who advised me to write a letter of explanation and return this report with another check for \$150.00 requesting removal of the penalty imposed.

As you will note from my record, I am always prompt with my corporate filings and I hope that I will not be penalized for the apparent postal failure to deliver this document.

I am respectfully requesting that you accept this report and my new check and waive the penalty.

Sincerely,


Joanne Zarrillo