

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K57888

FILED  
Mar 26, 2012  
Secretary of State

**Entity Name:** SOUTHEASTERN RISK CONSULTANTS, INC.

**Current Principal Place of Business:**

930 WEEDON DR. AVE  
SAINT PETERSBURG, FL 33702 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 20132  
SAINT PETERSBURG, FL 33742 US

**New Mailing Address:**

FEI Number: 59-2935540

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DUNN, VERONICA T.  
930 WEEDON DR. NE  
ST. PETERSBURG, FL 33702 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

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: DUNN, VERONICA T.  
Address: 930 WEEDON DRIVE NE  
City-St-Zip: ST. PETERSBURG, FL 33702

Title: PST  
Name: DUNN, VERONICA T.  
Address: 930 WEEDON DR NE  
City-St-Zip: ST. PETERSBURG, FL 33702

Title: PST  
Name: DUNN, FLETCHER M  
Address: 930 WEEDON DRIVE NE  
City-St-Zip: ST PETERSBURG, FL 33702

I hereby 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 all other like empowered.

SIGNATURE: VERONICA DUNN

PST

03/26/2012

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

\_\_\_\_\_ Date