

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91543 026 ***150.00

DOCUMENT # M70777

1. Entity Name
THE SOUTHEAST RESTORATION GROUP, INC.

Principal Place of Business 222 HICKMAN DR SUITE S-102 SANFORD FL 32771	Mailing Address 222 HICKMAN DR SUITE S-102 SANFORD FL 32771
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 601 Herbert St. Suite B Port Orange, FL 32129 USA	3. Mailing Address 601 Herbert St. Suite B Port Orange, FL 32129 USA
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4. FEI Number 59-2885557	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**KENNEDY, MARY M.
 222 HICKMAN DR
 S-102
 SANFORD FL 32771**

7. Name and Address of New Registered Agent

Name Mary M. Kennedy
Street Address (P.O. Box Number is Not Acceptable) 601 Herbert St. Suite B
City Port Orange FL Zip Code 32129

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 *Mary M. Kennedy*
 Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/15/02
 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 \$150.00
After May 1, 2002 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	DPT KENNEDY, LARRY 2261 RIVER RIDGE RD DELAND FL 32720	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	DVS KENNEDY, MARY 2261 RIVER RIDGE RD DELAND FL 32720	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

CR2E034 (9/01)

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: *Mary M. Kennedy, V.P.* **4/15/02** **386-304-4200**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #