

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M71912

FILED  
May 17, 2007  
Secretary of State

Entity Name: SOUTHEASTERN CHEMTREAT, INC.

**Current Principal Place of Business:**

5650 NW 135TH STREET  
CHIEFLAND, FL 32626

**New Principal Place of Business:**

**Current Mailing Address:**

5650 NW 135TH STREET  
CHIEFLAND, FL 32626

**New Mailing Address:**

FEI Number: 59-2878469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HARDEE, WILL  
5650 NW 135TH STREET  
CHIEFLAND, FL 32626 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: P ( ) Delete  
Name: HARDEE, WILL  
Address: 5650 NW 135TH STREET  
City-St-Zip: CHIEFLAND, FL 32626

Title: VP ( ) Delete  
Name: HARDEE, ELLISON E  
Address: 5750 NW 135TH STREET  
City-St-Zip: CHIEFLAND, FL 32626

Title: S ( ) Delete  
Name: HARDEE, MARY A  
Address: 5750 NW 135TH STREET  
City-St-Zip: CHIEFLAND, FL 32626

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: HARDEE, WILL G  
Address: 5650 NW 135TH STREET  
City-St-Zip: CHIEFLAND, FL 32626

I hereby certify that the information supplied with this filing does not qualify 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: WILL HARDEE

PRES

05/17/2007

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

\_\_\_\_\_  
Date