## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Jul 28, 2008 8:00 am Secretary of State **DOCUMENT # M75983** 07-28-2008 90033 012 \*\*\*550.00 1. Entity Name F M SOUTHEAST, INC. Mailing Address Principal Place of Business 60045639 250 KING OF PRUSSIA ROAD 250 KING OF PRUSSIA ROAD RADNOR, PA 19087 RADNOR, PA 19087 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07212008 Chg-P CR2E034 (12/06) Applied For City & State 4. FEI Number City & State 23-2510510 Not Applicable Country Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code FL 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. I am familiar with, and accept the obligations of registered agent SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 12, 2008 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Change ☐ Addition TITLE ☐ Delete DIMEMMO, JOSEPH NAME NAME 250 KING OF PRUSSIA RD. STREET ADDRESS STREET ADDRESS **RADNOR, PA 19087** CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition STEWART, SARAH L NAME NAME STREET ADDRESS 250 KING PRUSSIA RD STREET ADDRESS WAYNE, PA 19087 CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE BYRON, THERESA A NAME 250 KING OF PRUSSIA ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP RADNOR, PA 19087 CiTY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition Rabinson, Rabert L 250 KING OF PRUSSIN RD ROBINSON, ROBERT L NAME NAME 250 KING OF PRUSSIA RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FOLGROFT, PA 10032 CITY-ST-ZIP RADNOR ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET AODRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**FILED** 

Daytime Phone