2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003877

FILED Jan 05, 2005 Secretary of State

Entity Name: SOUTHERN HTE USER'S GROUP, INC.

Current Principal Place of Business: New Principal Place of Business:

100 NORTH U.S. 1 FORT PIERCE, FL 34954

Current Mailing Address: New Mailing Address:

5710 PALMETTO DRIVE FORT PIERCE, FL 34982

FEI Number: 65-1022905 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CT CORPORATION SYSTEMS 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition Name:

ROESNER, CARA ROESNER, CARA Name: 401 PARK AVE., SOUT Address: 401 PARK AVE., SOUT Address: City-St-Zip: WINTER PARK, FL 327894386 City-St-Zip: WINTER PARK, FL 327894386

Title: Title:

() Delete (X) Change () Addition MAY, WILLIAM T Name: MAY, WILLIAM T Name:

Address: 121 S.W. PORT ST. LUCIE BLVD. Address: 121 S.W. PORT ST. LUCIE BLVD. City-St-Zip: PORT SAINT LUCIE, FL 34984 City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: () Delete Title: () Change () Addition

NEUMAN, CHARLENE S Name: Name: Address: P.O. BOX 3226-100 N US #1 Address: City-St-Zip: FORT PIERCE, FL 349483226 City-St-Zip:

(X) Change () Addition Title: SD () Delete Title: SD

HARPER, JOHN Name: ROESNER, CARA Name: 401 PARK AVE SOUTH Address: Address: 6695 CHURCH STREET WINTER PARK, FL 327894386 City-St-Zip: City-St-Zip: DOUGLAS, GA 30143

Title: () Delete Title: (X) Change () Addition

BATTEN, CHRISTINE M FINDLEY, JOHN Name: Name: P.O. BOX 1687 P. O. BOX 390 Address: Address:

OPELIKA, AL 368030390 City-St-Zip: LAKE CITY, FL 32056 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

MANSFIELD, TAMI CARKHUFF, JACKIE Name: Name: P. O. BOX 277 Address: 368 S. COMMERCE AVE. Address:

SEBRING, FL 33870 ORMOND BEACH,, FL 321750277 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLENE NEUMAN Т 01/05/2005