FILED
May 12, 2003 8:00 am
Secretary of State
05-12-2003 90207 031 ****61.25

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000003877

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

Principal Place of Business	Mailing Address
100 NORTH U.S. 1 FORT PIERCE, FL 34954	P.O. BOX 3226 FORT PIERCE, FL 34948-3226

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	5710 Palmetto Drive Suite, Apt. #, etc.
City & State	Fort Pierce, FL
Zip / Country	34982 / St. Lucie

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1022905 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CT CORPORATION SYSTEMS 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to: Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BATTEN, CHRISTINE M P.O. BOX 1687-160 N ALACHUA ST LAKE CITY, FL 32056	☐ Delete	PD ROESNER, CARA 401 PARK AVE, SOUTH WINTER PARK, FL 327894386	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PE COOPER, JULIE PO BOX 1687-160 NW ALACHUA AVE LAKE CITY, FL 32056	☒ Delete	PE MAY, WILLIAM T 121 SW PORT ST. LUCIE BLVD PORT ST. LUCIE, FL 34984	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T NEUMAN, CHARLENE S P.O. BOX 3226-100 N US #1 FORT PIERCE, FL 349483226	☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ROESNER, CARA 401 PARK AVE SOUTH WINTER PARK, FL 327894386	☐ Delete	SD MANSFIELD, TAMI 368 S. COMMERCE AVE. SEABRING, FL 33870	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM MAY, WILLIAM T 121 SW PORT ST LUCIE BLVD PORT SAINT LUCIE, FL 34984	☐ Delete	PP BATTEN, CHRISTINE M P.O. BOX 1687 LAKE CITY, FL 32056	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

CR2E037 (10/02)

12. 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 617, 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.

SIGNATURE: Charlene S Neuman CHARLENE S NEUMAN, TREASURER 5/7/03 (772)460-2200
Signature and title or status of officer or director. Date. Daytime Phone #