2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2007 8:00 am
Secretary of State
02-08-2007 90048 044 ****61.25

DOCUMENT # N00000007727

1. Entity Name
SOUTH CENTRAL HTE USER'S GROUP, INC.

Principal Place of Business	Mailing Address
205 N RIVER ST SEGUIN, TX 78155	PO BOX 1043 SEGUIN, TX 78156

02042007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 75-2917660 ☐ 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
C T CORPORATION SYSTEM 1200 S 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 reinstating)

Filing Fee is $61.25
Due by May 1, 2007

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	PED RANGEL, CYNTHIA 410 NORTH CAMP ST. SEGUIN, TX 78155	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D 350 N. Guadalupe St. Seguin, Tx 78155	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD REILEY, RENO W 410 NORTH CAMP ST SEGUIN, TX 78155	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	 350 N. Guadalupe St. Seguin, Tx. 78155	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ZENTNER, JAMES PO BOX 4398 ODESSA, TX 79760	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PP/D	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PPD JONES, GEOFF 303 EAST 3RD STREET JOPLIN, MO 64801	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GOMEZ, SUE P.O. BOX 2649 WACO, TX 76702	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/E/D	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D Sandy Paulos P.O. Box 310289 New Braunfels, Tx 78131	☐ Change ☑ Addition

12. I hereby certify that the information supplied with this filing 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 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: Reno W. Reiley Reno W. Reiley 2-5-07 (830) 401-2367
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #