2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007727

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

FILED Feb 10, 2009 Secretary of State

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

205 N RIVER ST 425 FRANKLIN AVE SEGUIN, TX 78155 WACO, TX 76702

Current Mailing Address: New Mailing Address:

PO BOX 2649 PO BOX 1043 SEGUIN, TX 78156 WACO, TX 76702

FEI Number: 75-2917660 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:

C T CORPORATION SYSTEM 1200 S 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:

Name:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PPD (X) Change () Addition () Delete RANGEL, CYNTHIA PAULOS, SANDY Name: 350 N. GUADELUPE ST Address: P O BOX 310289 Address:

City-St-Zip: SEGUIN, TX 78155 City-St-Zip: NEW BRAUNFELS, TX 78131

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

REILEY, RENO W Name: GOMEZ, SUSANA Name: Address: 350 GUADELUPE ST Address: 425 FRANKLIN City-St-Zip: SEGUIN, TX 78155 City-St-Zip: WACO, TX 76702

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

PERRY, DELL WHITE, GWEN Name: Name: Address: 1117 E 15TH STREET Address: 1520 K STREET City-St-Zip: PLANO, TX 75074 City-St-Zip: PLANO, TX 75074

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

Name: WHITE, GWEN Name: MIKULAS, HEATHER Address: 1520 K STREET Address: 2 N MAIN STREET City-St-Zip: PLANO, TX 75074 City-St-Zip: TEMPLE, TX 76501

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

PAULES, SANDY PERRY, DELL Name: Name: PO BOX 310289 1117 E 15TH STREET Address: Address: NEW BRAUNFELS, TX 78131 City-St-Zip: City-St-Zip: PLANO, TX 75074

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSANA GOMEZ Т 02/10/2009