2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2009
Secretary of State

DOCUMENT# N08000004733

Entity Name: SOUTHEAST FOUNDATION FOR A COURSE IN MIRACLES, INC.

Current Principal Place of Business:

3269 TAMPA ROAD
PALM HARBOR, FL 34684

New Principal Place of Business:

2141 LAGOON DR
DUNEDIN, FL 34698

Current Mailing Address:

3269 TAMPA ROAD
PALM HARBOR, FL 34684

New Mailing Address:

2141 LAGOON DR
DUNEDIN, FL 34698

FEI Number: 26-2639141 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HEIST, REBECCA L
911 CHESTNUT STREET
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

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:

Title: VD ( ) Delete
Name: WATSON, BRENDA
Address: 2141 LAGOON DRIVE
City-St-Zip: DUNEDIN, FL 34698

Title: STD ( ) Delete
Name: WATSON, STAN
Address: 2141 LAGOON DRIVE
City-St-Zip: DUNEDIN, FL 34698

Title: PD (X) Delete
Name: HUNKLER, JOHN
Address: 3269 TAMPA ROAD
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: STAN WATSON CO-F 05/15/2009
Electronic Signature of Signing Officer or Director — Date