

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09138

Entity Name: VHA SOUTHEAST, INC.

FILED
Jan 27, 2009
Secretary of State

Current Principal Place of Business:

4211 W BOY SCOUT BLVD
#750
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

4211 W BOY SCOUT BLVD
#750
TAMPA, FL 33607

New Mailing Address:

FEI Number: 59-2550614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAWRENCE LEE
4211 W BOY SCOUT BLVD
#750
TAMPA, FL 33607 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: D () Delete
Name: DOTSON, PHILIP E
Address: 700 W MARKET STREET
City-St-Zip: ATHENS, FL 35611

Title: D () Delete
Name: JOHNSON, STEVEN M
Address: 615 N BONITA AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: TS () Delete
Name: KINDRED, BRYAN
Address: 809 UNIVERSITY BLVD EAST
City-St-Zip: TUSCALOOSA, AL 35401

Title: C () Delete
Name: MEANS, MICHAEL D
Address: 8249 DEVEREUX DRIVE
City-St-Zip: MELBOURNE, FL 329407955

Title: D () Delete
Name: STEPHENS, JACK T
Address: 1324 LAKELAND HILLS BLVD
City-St-Zip: LAKELAND, FL 33805

Title: D () Delete
Name: LACKEY, THOMAS O
Address: PO BOX 1050
City-St-Zip: SCOTTSBORO, AL 35768

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAWRENCE, LEE
Address: 4211 W BOY SCOUT BLVD STE 750
City-St-Zip: TAMPA, FL 33607

Title: TS (X) Change () Addition
Name: HILLENMEYER, JOHN
Address: 1414 KUHL AVENUE
City-St-Zip: ORLANDO, FL 32806

Title: C (X) Change () Addition
Name: KINDRED, BRYAN
Address: 809 UNIVERSITY BLVD EAST
City-St-Zip: TUSCALOOSA, AL 35401

Title: D (X) Change () Addition
Name: MEANS, MICHAEL D
Address: 8249 DEVEREUX DRIVE
City-St-Zip: MELBOURNE, FL 329407955

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: DONALD J BETHKE

D

01/27/2009

Electronic Signature of Signing Officer or Director

Date