FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

Corporation Name



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N18810 **DOCUMENT #**

(4)

CONSORTIUM OF SOUTH EASTERN LAW LIBRARIES, INC.

Principal Place of Business		Mailing Address				# 	- ad ii alah beberubah	DININ DINIH DEDEK 1091
PO BOX 9617 KNOXVILLE TN 37996-0002 US		PO BOX 8617 KNOXVILLE TN 37996 US						
		••			3. Date	01/20/1987	3a. Date of L 02/2	ast Report 2/1996
2. Principal Pla 21	ace of Business	2a. Mailing Address)		4. FEI	NOT APPLICABLE		Applied For Not Applicable
Suite, Apt #	J, etc.	Suite, Apt. #, et	D.		5. Cert	tificate of Status Desired		.75 Additional ee Required
City & State		City & State			l l	ction Campaign Financing	, man	5.00 May Be dded to Fees
- Z(ρ 24	Country 25	Zip 29	Cour	try	I	corporation has liability for ida Statutes	intangible tax un	der s. 199,032,
24	9. Name and Address of Current					ne and Address of New Re	gistered Agent	
				81 Name				
SCHROEDER, EDWIN M				B2 Street /	Address (P.O. E	Box Number is Not Acceptal	ble)	
FLA. STATE UNIV. LAW LIBRARY 425 WEST JEFFERSON				B3				
	ASSEE FL 32306		İ	B4 City		ALLOW THE PROPERTY OF THE PROP	FL 85	Zip Code
45 Director t	o the provisions of Sections 617,0502	and 617 1509 Elorida	Statutes the sh	Ove-named	corporation sui	omits this statement for the		ning its registered
office or re	o the provisions of Sections 017,0302 egistered agent, or both, in the State o in familiar with, and accept the obligati	i Florida, Such change	was authorized	by the carr	poration's board	of directors. I hereby acce	pt the appointme	int as registered
SIGNATURE	п тапішаг мідт, ано ассерт тіс оріцал	ons of, Section 617.05	oo, r jorida otali	iles.				
SIGNATURE	Signativis, typed or printed name of registered agent			Agent signature	required when reinst		DATE	
12.	OFFICERS AND		13.		ADD	ITIONS/CHANGES TO OFFI	CERS AND DIRE	
TITLE	P PERFORMENT DEPORTED	☐ DELE						
NAME	JEFFERIES, DEBORAH	*DYD/	1.2 NA		30 CE	NTRAL WHIL	LAW LIB	RAZY MA
STREET ADDRESS	N.C. CENTRAL UNIV LAW LIBI	EMIT		REET ADDRESS	7 6 66	1- (10/1	N	· ·
C(1Y-ST-ZIP	DURHAM N.	DELE		Y-ST-ZIP			□ ci	hange Addition
TITLE		LJ Mile					۰,۰	milgo C ricomon
NAME	BEINTEMA, WILLIAM J. UNIV. OF TENNESSEE LAW LI	BRARY N/A	2.2 NA	-				
STREET ADDRESS	KNOXVILLE TN	האו והאחפו		REET ADDRESS				
CITY-S1-ZIP	S S	X DELE		TY-ST-ZIP	5	<u></u>	□ CI	hange 🔀 Addition
NAME	COGGINS, TIMOTHY L	A Dece	3.2 NA	LIE		EY, MARY D	_	2
STREET ADDRESS	UNIV. OF ALABAMA LAW LIBF	RARY		REET ADDRESS	141551551	PPI COLLEGE	LAW LI	BRARY
	TUSCALOOSA AL	ow.i		TY-ST-ZIP	JACK			4)A
CITY-ST-ZIP	V	DELE					X 0	hange Addition
NAME	SANDERSON, ROSALIE M		4 2 N	ME				
STREET ADDRESS	UNIV. OF FLA. LAW LIBERTY			REET ADORESS	י אונאגן	OF FLA. LAW	LIBRAG.	I P/A
CITY-ST-ZIP	GAINESVILLE FL		4.4 CI	Y-ST-ZIP			,	/··
TITLE	D	☐ DELE					C C	hange Addition
NAME	ARANAS, PAULINE M.		5.2 NA	ME				
STREET ADDRESS	VANDERBILT UNIV. LAW LIBE	RTY	5.3 ST	REET ADDRESS	VANDER	BILT UNIV. L	.AN <u>LIB</u>	KHRY MA
CHY-ST-ZIP	NASHVILLE TN			TY-ST-ZIP				
TITLE	D	☐ DELE	TE 6.1 111	LE			□ c	hange
NAME	RILEY, CAMILLE		6.2 NA	ME				
STREET ADDRESS	WEST VIRGINIA UNIV (LAW)		6.3 ST	REET ADDRESS				
CITY-ST-ZIP	MORGANTOWN WV		6.4 CI	TY-ST-ZIP	1			

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

WILLIAM OF BEILHTEMA

1-67-57

423-974-4381

FILED

Mar 21 1997 8:00am

Secretary of State