## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N92000000862

FILED Feb 15, 2008 Secretary of State

Entity Name: SOUTHEAST AREA MOTOR COACH ASSOCIATION, INC.

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

16371 RUNWAY DR

BROOKSVILLE, FL 34604 US

Current Mailing Address: New Mailing Address:

P.O. BOX 15304

BROOKSVILLE, FL 34604 US

FEI Number: 59-3155764 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:

SCHIPPER, GEORGE PRES.

16371 RUNWAY DR.

BROOKSVILLE, FL 34604 US

SCHRENKEL, CHARLES M PRES.

5158 NORTHSHORE DR

POLK CITY, FL 33868 US

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: CHARLES M. SCHREKEL 02/15/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PRES () DeleteTitle:PRES (X) Change () AdditionName:SCHIPPER, GEORGE PRES.Name:SCHRENKEL, CHARLES PRES.Address:16371 RUNWAY DRAddress:5158 NORTHSHORE DRCity-St-Zip:BROOKSVILLE, FL 34604City-St-Zip:POLK CITY, FL 33868

Title: SVPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ANDERSON, DOUG SR. V.P
 Name:

 Address:
 PO BOX 896
 Address:

 City-St-Zip:
 ROSELAND, FL 32957
 City-St-Zip:

Title: TD () Delete Title: TD (X) Change () Addition Name: FLORENCE, MYRTLE B TREAS. Name: MOSSON, THOMAS F TREAS.

Address: 2419OAKBOWERY RD PO BOX 2171 Address: 14531 DILBECK DR
City-St-Zip: OPELIKA, FL 36803 City-St-Zip: SPRING HILL, FL 34610

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: THOMAS F. MOSSON TREA 02/15/2008