2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2007
Secretary of State

DOCUMENT# N95000000233

Entity Name: SOUTHEAST SEMINOLE HEIGHTS CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 7298
TAMPA, FL 336737298

New Principal Place of Business:

929 E MCBERRY ST
TAMPA, FL 33603

Current Mailing Address:

P.O. BOX 7298
TAMPA, FL 336737298

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAAEN, RANDI L
929 E MCBERRY ST
TAMPA, FL 33603 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: VP ( ) Delete
Name: GARCIA, MARIA
Address: 910 N. BAY ST.
City-St-Zip: TAMPA, FL 33603

Title: T ( ) Delete
Name: RAAEN, RANDI
Address: 929 E MCBERRY ST
City-St-Zip: TAMPA, FL 33603

Title: S ( ) Delete
Name: MATTHEWS, IRENE
Address: 1313 E CONCVER ST
City-St-Zip: TAMPA, FL 33603

Title: D ( ) Delete
Name: RODER, FRANK
Address: 908 E LOUISIANA
City-St-Zip: TAMPA, FL 33603

Title: P ( ) Delete
Name: SIMONS, SHERRY
Address: 911 E SHADOWLAWN
City-St-Zip: TAMPA, FL 33603

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:

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 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: RANDI L RAAEN T 01/17/2007

Electronic Signature of Signing Officer or Director — Date