## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000000233

FILED Jan 19, 2009 Secretary of State

Entity Name: SOUTHEAST SEMINOLE HEIGHTS CIVIC ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 929 E MCBERRY ST 929 E MCBERRY ST TAMPA, FL 33603 TAMPA, FL 33611 **Current Mailing Address: New Mailing Address:** P.O. BOX 7298 4109 S. MACDILL AVE TAMPA, FL 336737298 TAMPA, FL 33611 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RAAEN, RANDI L RAAEN, RANDI L 929 E MCBERRY ST 4109 S. MACDILL AVE TAMPA, FL 33611 TAMPA, FL 33603 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: RANDI L RAAEN 01/19/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VΡ () Delete () Change () Addition GARCIA, MARIA Name: Name: 910 N. BAY ST. Address: Address: City-St-Zip: TAMPA, FL 33603 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: RAAEN, RANDI Name: Address: 929 E MCBERRY ST Address: City-St-Zip: TAMPA, FL 33603 City-St-Zip: Title: () Delete Title: () Change () Addition SUSAN, MARTIN Name: Name: 910 E MCBERRY ST Address: Address: City-St-Zip: TAMPA, FL 33603 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RODER, FRANK Name: 908 E LOUISIANA Address: Address: City-St-Zip: TAMPA, FL 33603 City-St-Zip: Title: Title: () Delete () Change () Addition SIMONS, SHERRY Name: Name: 911 E SHADOWLAWN Address: Address: City-St-Zip: TAMPA, FL 33603 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: RANDI L RAAEN T 01/19/2009