

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003347

FILED
Apr 24, 2004
Secretary of State**Entity Name:** SOUTHEAST BENEVOLENT AND MANAGEMENT ASSOCIATION, INC.**Current Principal Place of Business:**6423 HAMILTON BRIDGE ROAD
MILTON, FL 32570**New Principal Place of Business:****Current Mailing Address:**6423 HAMILTON BRIDGE ROAD
MILTON, FL 32570**New Mailing Address:****FEI Number:** 59-3620714**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CHARLES W. BOYD
6020 KINGWOOD DRIVE
MILTON, FL 32570 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:** P () Delete
Name: BOYD, CHARLES W
Address: 6020 KINGWOOD DRIVE
City-St-Zip: MILTON, FL 32570**Title:** DV () Delete
Name: GUNTON, JOHN C
Address: 6622 HINOTE STREET
City-St-Zip: MILTON, FL 32570**Title:** SD () Delete
Name: MAYHEW, MARILYN L
Address: 5265 DEL MONTE ST.
City-St-Zip: MILTON, FL 32583**Title:** D () Delete
Name: REDMOND, ROGER J
Address: 7128 WOLFETEVER DRIVE
City-St-Zip: HARRISON, TN 37341**Title:** D () Delete
Name: JOHNSON, RICHARD S
Address: 6232 WEEKLY STREET
City-St-Zip: MILTON, FL 32570**Title:** D () Delete
Name: JOHNSON, JIMMY L
Address: 4380 PONDEROSA DRIVE
City-St-Zip: MILTON, FL 32583**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** DV (X) Change () Addition
Name: LUNSFORD, ROBERT L
Address: 5466 RUSSELL DR.
City-St-Zip: MILTON, FL 32570**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: JOHNSON, JIMMY L
Address: 4380 PONDEROSA DR.
City-St-Zip: MILTON, FL 32583**Title:** D (X) Change () Addition
Name: LAW, CHARLES R
Address: 11964 APPLETON RD.
City-St-Zip: CASTLEBERRY, AL 36432

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARILYN L. MAYHEW

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04/24/2004

Electronic Signature of Signing Officer or Director

Date