

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003340

FILED
Jul 24, 2009
Secretary of State

Entity Name: SOUTHEAST UTILITIES REVENUE PROTECTION ASSOCIATION, INC.

Current Principal Place of Business:

5225 TECH DATA DR
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

5225 TECH DATA DR
CLEARWATER, FL 33760

New Mailing Address:

FEI Number: 26-3828867 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RHINEHART, SUSAN
5225 TECH DATA DR
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

REINHARDT, SUSAN
5225 TECH DATA DR
CLEARWATER, FL 33760 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: SUSAN REINHARDT

07/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SAD () Delete
Name: REINHARDE, SUSAN
Address: 5225 TECH DATA DR
City-St-Zip: CLEARWATER, FL 33760

Title: TD () Delete
Name: HAMMERBERG, JOHN
Address: 702 N FRANKLIN AVE
City-St-Zip: TAMPA, FL 33601

Title: PD () Delete
Name: THOMAS, KELLY
Address: 5225 TECH DATA DR
City-St-Zip: CLEARWATER, FL 33760

Title: DV () Delete
Name: REINHARDT, SUSAN
Address: 5225 TECH DATA DR
City-St-Zip: CLEARWATER, FL 33760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SAD (X) Change () Addition
Name: FEE, EDDIE
Address: 100 W. ANDERSON STREET
City-St-Zip: ORLANDO, FL 32712

Title: TD (X) Change () Addition
Name: LANGSDALE, SANDY
Address: 1190 US HWY 27 EAST
City-St-Zip: MOORE HAVEN, FL 33471

Title: PD (X) Change () Addition
Name: REINHARDT, SUSAN
Address: 5225 TECH DATA DR
City-St-Zip: CLEARWATER, FL 33760

Title: DV (X) Change () Addition
Name: HAMMERBERG, JOHN
Address: 702 N FRANKLIN AVE
City-St-Zip: TAMPA, FL 33601

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: SUSAN REINHARDT

PD

07/24/2009

Electronic Signature of Signing Officer or Director

Date