2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007450

FILED Aug 11, 2007 Secretary of State

Entity Name: SOUTHEASTERN REGIONAL RELOCATION COUNCIL, INC.

Current B				
Guilelli P	rincipal Place of Business:	New Prince	ipal Place of Business:	
8131 VINE PMB 312	LAND AVE			
), FL 32821			
Current M	lailing Address:	New Maili	ng Address:	
PMB 312	ELAND AVE D, FL 32821			
In accordan	: 59-3616323			
800-C 3RE NEPTUNE The above	ICHARD C ATT. D. STREET E BEACH, FL 32266 US named entity submits this statement for the e of Florida.	purpose of changing i	ts registered office or registered agent, or both,	
SIGNATUF	RE:			
	Electronic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name:	P () Delete DIX, JIM 7028 CISCO GARDENS ROAD W	Title: Name:	P (X) Change () Addition KREILING, ROB	
	JACKSONVILLE, FL 32219	Address: City-St-Zip:	8131 VINELAND AVE, PMB 312 ORLANDO, FL 32812	
City-St-Zip: Title: Name: Address:	JACKSONVILLE, FL 32219 VP () Delete KREILING, ROB 5909 32ND ST EAST ELLENTON, FL 34222		•	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	VP () Delete KREILING, ROB 5909 32ND ST EAST	City-St-Zip: Title: Name: Address:	ORLANDO, FL 32812 VP (X) Change () Addition VALIMONT, SARAH 8131 VINELAND AVE, PMB 312	
Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: City-St-Zip: City-St-Zip:	VP () Delete KREILING, ROB 5909 32ND ST EAST ELLENTON, FL 34222 S () Delete CALDWELL, DONNA 5753 LAKE MELROSE DR	City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	ORLANDO, FL 32812 VP (X) Change () Addition VALIMONT, SARAH 8131 VINELAND AVE, PMB 312 ORLANDO, FL 32812 S (X) Change () Addition MAY, ANN 8131 VINELAND AVE, PMB 312	

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: TAMI GRANT T 08/11/2007