

DOCUMENT # P04000073926	
1. Entity Name SOUTHEASTERN UNDERGROUND, INC.	

Secretary of State

04-25-2005 90303 043 ***158.75

Principal Place of Business 11976 SUNOWA SPRINGS TRAIL BRYCEVILLE, FL 32009	Mailing Address 11976 SUNOWA SPRINGS TRAIL BRYCEVILLE, FL 32009
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50043508

2. Principal Place of Business		3. Mailing Address 1114 E John Sims Pkwy Suite, Apt. #, etc. Postal Mail Box 252 City & State Niceville, FL Zip 32578 Country USA	
Suite, Apt. #, etc.	City & State	Zip	Country

04152005 Chg-P CR2E034 (10/03)

4. FEI Number
20-1160940
☐ Applied For
☒ Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent F&L CORP. ONE INDEPENDENT DRIVE SUITE 1300 JACKSONVILLE, FL 32202	
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7. Name and Address of New Registered Agent Name Rodney Drew Street Address (P.O. Box Number is Not Acceptable) 11976 Sunowa Springs Trail City Bryceville FL Zip Code 32009	
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9. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Rodney D. Drew Director DATE 4-20-05
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DREW, RODNEY 10000 CONWAY ROAD MOBILE, AL 36695 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PACE, SAMMY 11976 SUNOWA SPRINGS TRAIL BRYCELILLE, FL 32009 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DICKEY, BRUCE 1704 PALISADES POINT LANE AUSTIN, TX 78738 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: Rodney D. Drew Rodney Drew DATE 4-20-05 904-879-9107
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR