

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000056651

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: SOUTHEAST CONTRACTING/SITE DEVELOPMENT, INC

**Current Principal Place of Business:**

2587 BOTTOMRIDGE DR  
ORANGE PARK, FL 32065

**New Principal Place of Business:**

1333 HAINES STREET  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

2587 BOTTOMRIDGE DR  
ORANGE PARK, FL 32065

**New Mailing Address:**

1333 HAINES STREET  
JACKSONVILLE, FL 32206

FEI Number: 20-5140945

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

COLLINS, LAURA S  
6885 BELFORT OAKS PLACE  
SUITE 220  
JACKSONVILLE, FL 32216 US

**Name and Address of New Registered Agent:**

PALY, EUGENE  
1333 HAINES STREET  
JACKSONVILLE, FL 32206 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: EUGENE PALY, PRESIDENT/TREASURER

04/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SCHILKE, WAYNE B  
Address: 2587 BOTTOMRIDGE DR  
City-St-Zip: ORANGE PARK, FL 32065

Title: VP/T (X) Delete  
Name: PALY, EUGENE  
Address: 1333 HAINES ST  
City-St-Zip: JACKSONVILLE, FL 32206

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/T (X) Change ( ) Addition  
Name: PALY, EUGENE  
Address: 1333 HAINES STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EUGENE PALY, PRESIDENT/TREASURER

P/T

04/12/2007

Electronic Signature of Signing Officer or Director

Date