## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000017913

FILED Jan 07, 2008 Secretary of State

Entity Name: SOUTHEASTERN DOCUMENT SERVICES OF PINELLAS COUNTY, INC.

Current Principal Place of Business:  200 CENTRAL AVENUE SUITE 650 ST. PETERSBURG, FL 33701 US  Current Mailing Address:  200 CENTRAL AVENUE SUITE 650 ST. PETERSBURG, FL 33701 US  Current Mailing Address:  200 CENTRAL AVENUE SUITE 650 ST. PETERSBURG, FL 33701 US  FEI Number: 08-1806345 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()  Name and Address of Current Registered Agent:  GEITNER, CHARLES G ESQUIRE C/O BROAD AND CASSEL, 100 N. TAMPA STREET SUITE 3500 TAMPA, FL 33602 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bot in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date  Electronic Signature of Registered Agent  Date  Electronic Signature of Registered Agent  Date  COFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  Title: D,P () Delete Name: MCKEE, BARBARA Name: MCKEE, BARBARA Name: MCKEE, HAROLD Name: MAddress: G01 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: Title: D, ST () Delete Title: D, ST () Delete Name: MAddress: G01 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: Title: D, ST () Delete Name: MAddress: G01 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: Title: MARME: MARME: MCKEE, HAROLD Name: MAddress: G01 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: Title: MARME: MARME: MCKEE, HAROLD Name: MARME: MARM							
SUITE 650 ST. PETERSBURG, FL 33701 US  Current Mailing Address:  200 CENTRAL AVENUE SUITE 650 ST. PETERSBURG, FL 33701 US  FEI Number St. 33701 US  FEI Number Not Applicable ( ) Certificate of Status Desired ( )  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:  SEITNER, CHARLES G ESQUIRE C/O BROAD AND CASSEL, 100 N. TAMPA STREET  SUITE 3500 TAMPA, FL 33602 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bot in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date  Electronic Signature of Registered Agent  Title: () Change () Addition  Name:  MCKEE, BARBARA  Address: 601 N. ASHLEY DRIVE, SUITE 200  City-St-Zip: TAMPA, FL 33602 US  Title: D, VP () Delete  Title: () Change () Addition  Name:  MCKEE, HAROLD  Address: (City-St-Zip:  Title: () Change () Addition  Name:  MCKEE, KEN  Address: (City-St-Zip:  Title: () Change () Addition  Name:  MCKEE, KEN  Address: (City-St-Zip:  Title: () Change () Addition  Name:  Address: (City-St-Zip:  Title: () Change () Add	Current Principal Place of Business:				New Principal Plac	New Principal Place of Business:	
Current Mailing Address:  Courrent Mailing Address:  COU CENTRAL AVENUE SUITE 650 ST. PETERSBURG, FL 33701 US  FEI Number: 06-1806345 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:  COO BROAD AND CASSEL, 100 N. TAMPA STREET SUITE 3500 TAMPA, FL 33602 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bot in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date  Electronic Trust Fund Contribution ().  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  Title: D.P. () Delete Name: MCKEE, BARBARA Address: 601 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: TAMPA, FL 33602 US  Title: D,VP () Delete Name: MCKEE, HAROLD Address: City-St-Zip: Title: D,ST () Delete Name: MCKEE, KEN Name: Address: City-St-Zip: Title: D,ST () Delete Name: MCKEE, KEN Name: MCKEE, KEN Name: Address: Addres			:				
200 CENTRAL AVENUE SUITE 650 ST. PETERSBURG, FL 33701 US FEI Number: 06-1806345 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent:  SEITNER, CHARLES G ESQUIRE C/O BROAD AND CASSEL, 100 N. TAMPA STREET SUITE 3500 TAMPA, FL 33602 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bot in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date  Electron Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Title:  D.P ( ) Delete Name: MCKEE, BARBARA Address: City-St-Zip: TAMPA, FL 33602 US  Title: D.V ( ) Delete Name: MCKEE, HAROLD Address: City-St-Zip: TAMPA, FL 33602 US  Title: D.ST ( ) Delete Name: MCKEE, KEN Name: MCKE			33701	US			
SUITE 650 ST. PETERSBURG, FL 33701 US FEI Number: 06-1806345 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent:  GEITNER, CHARLES G ESQUIRE C/O BROAD AND CASSEL, 100 N. TAMPA STREET SUITE 3500 TAMPA, FL 33602 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bot in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date  E	Current Mailing Address:				New Mailing Addre	ss:	
FEI Number: 06-1806345 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:  GEITNER, CHARLES G ESQUIRE  C/O BROAD AND CASSEL, 100 N. TAMPA STREET  SUITE 3500  TAMPA, FL 33602 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bot in the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent   Date	SUITE 650			LIS			
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In the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  Title: D,P ( ) Delete Name: MCKEE, BARBARA Address: 601 N. ASHLEY DRIVE, SUITE 200 Address: City-St-Zip: TAMPA, FL 33602 US  Title: D,VP ( ) Delete  Title: ( ) Change ( ) Addition Name: ( ) City-St-Zip:  Title: ( ) Change ( ) Addition Name: ( ) City-St-Zip:  Title: D,VP ( ) Delete  Title: ( ) Change ( ) Addition Name: ( ) City-St-Zip:  Title: D,ST ( ) Delete  Title: ( ) Change ( ) Addition Name: ( ) Change ( ) Addition	C/O BROA SUITE 350	AD AND CASS 10					
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: D,P ( ) Delete Name: MCKEE, BARBARA Address: 601 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: TAMPA, FL 33602 US  Title: D,VP ( ) Delete Name: MCKEE, HAROLD Name: MCKEE, HAROLD Address: 601 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: TAMPA, FL 33602 US  Title: D,VP ( ) Delete Name: MCKEE, HAROLD Address: 601 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: TAMPA, FL 33602 US  Title: D,ST ( ) Delete Name: MCKEE, KEN Name: MCKEE, KEN Name: MCKEE, KEN Address: 601 N. ASHLEY DRIVE, SUITE 200 Address: 601 N. ASHLEY DRIVE, SUITE 200 Address: MCKEE, KEN Address: 601 N. ASHLEY DRIVE, SUITE 200			submits	this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  Title: D,P ( ) Delete Name: MCKEE, BARBARA Address: 601 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: TAMPA, FL 33602 US  Title: D,VP ( ) Delete Name: MCKEE, HAROLD Name: MCKEE, HAROLD Name: MCKEE, HAROLD Address: 601 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: TAMPA, FL 33602 US  Title: D,ST ( ) Delete Title: D,ST ( ) Delete Name: MCKEE, KEN Address: 601 N. ASHLEY DRIVE, SUITE 200 Address: 601 N. ASHLEY DRIVE, SUITE 200 Address: 601 N. ASHLEY DRIVE, SUITE 200 Address: MCKEE, KEN Name: MCKEE, KEN Address: 601 N. ASHLEY DRIVE, SUITE 200 Address: Address:	SIGNATUF	RE:					
OFFICERS AND DIRECTORS:  Title: D,P ( ) Delete Name: MCKEE, BARBARA Address: 601 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: TAMPA, FL 33602 US  Title: D,VP ( ) Delete Name: MCKEE, HAROLD Address: 601 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: TAMPA, FL 33602 US  Title: D,VP ( ) Delete Name: MCKEE, HAROLD Address: 601 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: TAMPA, FL 33602 US  Title: D,ST ( ) Delete Name: MCKEE, KEN Address: 601 N. ASHLEY DRIVE, SUITE 200 Address:		Electron	nic Signa	ture of Registered Age	ent	Date	
Title: D,P ( ) Delete Title: ( ) Change ( ) Addition Name: MCKEE, BARBARA Name: Address: 601 N. ASHLEY DRIVE, SUITE 200 Address: City-St-Zip: TAMPA, FL 33602 US Title: D,VP ( ) Delete Title: ( ) Change ( ) Addition Name: MCKEE, HAROLD Name: MCKEE, HAROLD Address: 601 N. ASHLEY DRIVE, SUITE 200 Address: City-St-Zip: TAMPA, FL 33602 US City-St-Zip: Title: D,ST ( ) Delete Title: ( ) Change ( ) Addition Name: MCKEE, KEN Name: MCKEE, KEN Name: MCKEE, KEN Name: MCKEE, KEN Name: Address: 601 N. ASHLEY DRIVE, SUITE 200 Address:	Election Car	npaign Financin	g Trust Fu	und Contribution ( ).			
Name: MCKEE, BARBARA Address: 601 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: TAMPA, FL 33602 US  Title: D,VP () Delete Name: MCKEE, HAROLD Name: MCKEE, HAROLD Address: 601 N. ASHLEY DRIVE, SUITE 200 City-St-Zip: TAMPA, FL 33602 US  Title: D,ST () Delete Title: D,ST () Delete Title: D,ST () Delete Name: MCKEE, KEN Name: MCKEE, KEN Name: MCKEE, KEN Name: Address: 601 N. ASHLEY DRIVE, SUITE 200 Address: 601 N. ASHLEY DRIVE, SUITE 200 Address: Address: Address:	OFFICERS AND DIRECTORS:				ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Name:         MCKEE, HAROLD         Name:           Address:         601 N. ASHLEY DRIVE, SUITE 200         Address:           City-St-Zip:         TAMPA, FL 33602 US         City-St-Zip:           Title:         D,ST () Delete         Title: () Change () Addition           Name:         MCKEE, KEN         Name:           Address:         601 N. ASHLEY DRIVE, SUITE 200         Address:	Name: Address:	MCKEE, BARB 601 N. ASHLE	ÅRA Y DRIVE, S	SUITE 200	Name: Address:	( ) Change ( ) Addition	
Name: MCKEE, KEN Name: Address: 601 N. ASHLEY DRIVE, SUITE 200 Address:	Name: Address:	MCKEE, HARC 601 N. ASHLEY	DLD Y DRIVE, S	SUITE 200	Name: Address:	( ) Change ( ) Addition	
	Name: Address:	MCKEE, KEN 601 N. ASHLEY	´ Y DRIVE, S	SUITE 200	Name: Address:	( ) Change ( ) Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEN MCKEE D.ST 01/07/2008