2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000017913

FILED Jun 19, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

200 CENTRAL AVENUE SUITE 650

ST. PETERSBURG, FL 33701 US

New Mailing Address: Current Mailing Address:

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 (X)

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

GEITNER, CHARLES G ESQUIRE

GEITNER, CHARLES G ESQUIRE C/O BROAD AND CASSEL, 100 N. TAMPA STREET C/O HINSHAW, 100 SOUTH ASHLEY **SUITE 3500** SUITE 500

TAMPA, FL 33602 US TAMPA, FL 33602 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: 06/19/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

MCKEE, BARBARA Name: Name: MCKEE, BARBARA

601 N. ASHLEY DRIVE, SUITE 200 1000 N. ASHLEY DRIVE, SUITE 104 Address: Address:

City-St-Zip: TAMPA, FL 33602 US City-St-Zip: TAMPA, FL 33602 US

D,VP Title: D,VP Title: () Delete (X) Change () Addition

Name: MCKEE, HAROLD Name: MCKEE, HAROLD

601 N. ASHLEY DRIVE, SUITE 200 1000 N. ASHLEY DRIVE, SUITE 104 Address: Address:

TAMPA, FL 33602 US TAMPA, FL 33602 US City-St-Zip: City-St-Zip:

Title: Title: D.ST () Delete D ST (X) Change () Addition

MCKEE, KEN MCKEE, KEN Name: Name:

601 N. ASHLEY DRIVE, SUITE 200 1000 N. ASHLEY DRIVE, SUITE 104 Address: Address:

City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33602

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 DST 06/19/2009