

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000095945

FILED
Nov 10, 2009
Secretary of State**Entity Name:** SOUTHEAST INTERIORS, INC.**Current Principal Place of Business:**12 WHITHER PL.
PALM COAST, FL 32137**New Principal Place of Business:****Current Mailing Address:**12 WHITHER PL.
PALM COAST, FL 32137**New Mailing Address:****FEI Number:** 26-0795748**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NUNNALLY, JOSHUA V
12 WHITAKER PL>
PALM COAST, FL 32164 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: NUNNALLY, JOSHUA V
Address: 12 WHITAKER PL
City-St-Zip: PALM COAST, FL 32164

Title: DP () Delete
Name: NUNNALLY, BARRY
Address: 2 COLD SPRING CT
City-St-Zip: PALM COAST, FL 32137

Title: T () Delete
Name: NUNNALLY, SCOTT
Address: 2 COLD SPRING CT
City-St-Zip: PALM COAST, FL 32137

Title: S () Delete
Name: NUNNALLY, BARRY A
Address: 2 COLD SPRING CT
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change () Addition
Name: NUNNALLY, SCOTT
Address: 2 COLD SPRING CT
City-St-Zip: PALM COAST, FL 32137

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

Title: S (X) Change () Addition
Name: NUNNALLY, JOSHUA A
Address: 2 COLD SPRING CT
City-St-Zip: PALM COAST, FL 32137

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: JOSHUA NUNNALLY

PRES

11/10/2009

Electronic Signature of Signing Officer or Director

Date