

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21185

FILED
Apr 29, 2009
Secretary of State

Entity Name: SOUTHEAST LEARNING SYSTEMS, INC.

Current Principal Place of Business:

35883 US HWY 280
SYLACAUGA, AL 35150 US

New Principal Place of Business:

1636 OLD FAYETTEVILLE RD.
SYLACAUGA, AL 35151 US

Current Mailing Address:

P O BOX 5010
CHILDERSBURG, AL 35044 US

New Mailing Address:

1636 OLD FAYETTEVILLE RD.
SYLACAUGA, AL 35151 US

FEI Number: 63-0955345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLAIN, EDDIE W.
362 BEAL PARKWAY
STE 201
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

PERKINS, GEORGE A
17119 PERDIDO KEY DR
G11
PENSACOLA, FL 32507 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: GEORGE A PERKINS

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCLAIN, EDDIE W.
Address: 123 HICKORY STREET
City-St-Zip: CHILDERSBURG, AL 35044

Title: CVD (X) Delete
Name: PERKINS, GEORGE A.
Address: 1636 OLD FAYETTEVILLE RD
City-St-Zip: SYLACAUGA, AL 35151

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PERKINS, GEORGE A
Address: 1636 OLD FAYETTEVILLE RD
City-St-Zip: SYLACAUGA, AL 35151

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

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: GEORGE A PERKINS

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date