

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000038800 (7)

1. Corporation Name

SOUTHEAST PROPERTIES HOLDING CORPORATION, INC.

Principal Place of Business

3986 BOULEVARD CENTER DR. SUITE 101  
JACKSONVILLE FL 32207

Mailing Address

3986 BOULEVARD CENTER DR. SUITE 101  
JACKSONVILLE FL 32207-2838

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

06/01/1993

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3202967

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title of applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME DAVIS, IRVIN H  
STREET ADDRESS 3986 BOULEVARD CENTER DR  
CITY-ST-ZIP JACKSONVILLE FL  
☒ DELETE

TITLE T  
NAME STEPHENS, JAMES L  
STREET ADDRESS 3986 BLVD CTR DR  
CITY-ST-ZIP JACKSONVILLE FL  
☐ DELETE

TITLE S  
NAME JENKINS, W LAWRENCE  
STREET ADDRESS 3986 BLVD CTR DR  
CITY-ST-ZIP JACKSONVILLE FL  
☐ DELETE

TITLE V  
NAME TEAGLE, JAMES  
STREET ADDRESS 3986 BLVD CTR DR  
CITY-ST-ZIP JACKSONVILLE FL  
☐ DELETE

TITLE V  
NAME WILKEY, JAMES L  
STREET ADDRESS 3986 BLVD CTR DR  
CITY-ST-ZIP JACKSONVILLE FL  
☒ DELETE

TITLE DV  
NAME HUGHES, VICTOR A  
STREET ADDRESS 3986 BLVD CTR DR  
CITY-ST-ZIP JACKSONVILLE FL  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☒ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☒ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☒ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: W. Lawrence Jenkins, Secretary April 17, 1997

904/346-1411

CR2E034 (9/96)

FILED  
Apr 23 1997 8:00am  
Secretary of State

