

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000076513

Entity Name: MATRIX SOUTHEAST, INC.

FILED
Jan 14, 2005
Secretary of State

Current Principal Place of Business:

12024 MASSIVE OAKS CT.
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

12024 MASSIVE OAKS CT.
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 59-3211725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATRICK, MARK R
4029 ATLANTIC BLVD.
JACKSONVILLE, FL 32207 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GREENE, GEORGE K
Address: 4927 BRIGHTON DR
City-St-Zip: JACKSONVILLE, FL 32217

Title: STD () Delete
Name: ENGLAND, JAMES
Address: 14775 ST AUGUSTINE ROAD
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: ENGLAND, JAMES
Address: 12024 MASSIVE OAKS CT.
City-St-Zip: JACKSONVILLE, FL 32223

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES E. ENGLAND

STD

01/14/2005

Electronic Signature of Signing Officer or Director

Date