

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000090667

FILED
Mar 24, 2009
Secretary of State

Entity Name: SOUTHEAST ENVIRONMENTAL SOLUTIONS, INC.

Current Principal Place of Business:

801 N. PARK ROAD
PLANT CITY, FL 33563

New Principal Place of Business:

Current Mailing Address:

801 N. PARK ROAD
PLANT CITY, FL 33563

New Mailing Address:

FEI Number: 59-3283061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEMENTI, ROSANNE G
8627 HERONS COVE PLACE
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

CLEMENTI, ROSANNE G
5203 BAYSHORE BLVD.
APT. 12
TAMPA, FL 33611 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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: CLEMENTI, ROSANNE G
Address: 8627 HERONS COVE
City-St-Zip: TAMPA, FL 33647

Title: VD () Delete
Name: CRABILL, R. FRED
Address: 801 N. PARK ROAD
City-St-Zip: PLANT CITY, FL 33563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: CLEMENTI, ROSANNE G
Address: 5203 BAYSHORE BLVD, APT. 12
City-St-Zip: TAMPA, FL 33611

Title: VD (X) Change () Addition
Name: CRABILL, R. FRED
Address: 5612 OLD SCOTT LAKE ROAD
City-St-Zip: LAKE LAND, FL 33813

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: ROSANNE G. CLEMENTI

PSTD

03/24/2009

Electronic Signature of Signing Officer or Director

Date