2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000001165

1. Entity Name

SOUTHEAST MANAGEMENT CORPORATION OF AMERICA, INC.



FILED Apr 21, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

24200 CHAGRIN BLVD. SUITE 237 24200 CHAGRIN BLVD

SUITE 237 SUITE 237
BEACHWOOD, OH 44T22 BEACHWOO

6. Name and Address of Current Registered Agent

BEACHWOOD, OH 44122



DO NOT WRITE IN THIS SPACE

04112006

No Chg-P

CR2E034 (11/05)

4. FEI Number 34-1798321

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

ANDERSON, WENDY ESQ. 100 S. ORANGE AVE. SUITE 400 ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

		\$25,025.5 \$2,026.5		
 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. I am familiar with, and accept the obligations of registered agent. 				
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SIGNATURE Segnature, typed or printed name of registered again and time if approache. (HOTE: Registered Again against required when registation)				DATE
			A red File well is the select	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WASSERSTROM, SANFORD 24200 CHAGRIN BLVD., SUITE 237 BEACHWOOD, OH 44122			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				05/03/06-80063-020 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		DO	NOT WRITE
Title Name Street Address City-St-Zip			IN:	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
title Name Street Address City-St-Zip	and the second s			
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				