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FILED  
May 14 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P95000024048 (7)

1. Corporation Name

SOUTHERN UNITED ENTERPRISES, INC.



Principal Place of Business

Mailing Address

475 SPANISH TRACE DR  
ALTAMONTE SPRINGS FL 32714  
US

POB 162917  
ALTAMONTE SPRINGS FL 32716  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1995

4. FEI Number

59-3307635

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 305 W. College St.

22 City & State

27 Suite, Apt. #, etc.  
28 meadville, PA

23 Zip Country

29 16335 30 US

9. Name and Address of Current Registered Agent

TINDALL, MARJORIE L  
475 SPANISH TRACE DR  
ALTAMONTE SPRINGS FL 32714

10. Name and Address of New Registered Agent

81 Name Smith, Roberta L  
82 Street Address (P.O. Box Number is Not Acceptable)  
4805 Ramona Blvd.  
83  
84 City Jacksonville FL 85 Zip Code 32205

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 Roberta L. Smith

Roberta L. Smith

4-28-98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DST  
NAME SMITH, ROBERTA L.  
STREET ADDRESS 4805 RAMONA BLVD.  
CITY-ST-ZIP JACKSONVILLE FL 32205

TITLE DP  
NAME TINDALL, MARJORIE L  
STREET ADDRESS 475 SPANISH TRACE DR  
CITY-ST-ZIP ALTAMONTE SPRINGS FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

2.1 TITLE DP  
2.2 NAME Tindall, Marjorie L.  
2.3 STREET ADDRESS 305 W. College Street  
2.4 CITY-ST-ZIP meadville, PA 16335

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

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

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I 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 Marjorie L. Tindall 4/28/98 814-333-9445

CR2E034 (10/97)