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PROFIT CORPORATION **ANNUAL REPORT**

1998

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ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000068864 (3)

SOUTHEAST EQUITY PARTNERS OF FLORIDA, INC.

Mailing Address

FILED Apr 16 1998 8:00am Secretary of State



Principal Place of Business 10 FAIRWAY DRIVE, SUITE 226 10 FAIRWAY DRIVE, SUITE 226 DEERFIELD BEACH FL 33441 **DEERFIELD BEACH FL 33441** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/14/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0681174 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. ☐ Yes ☐ No 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ANGELSON, JERROLD L 10 FAIRWAY DRIVE, SUITE 226 82 Street Address (P.O. Box Number is Not Acceptable) **DEERFIELD BEACH FL 33441** 83 City 84 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 if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE PD 1 1 TITLE NAME ANGELSON, JERROLD 1.2 NAME STREET ADDRESS 10 FAIRWAY DR STE 226 1.3 STREET ADDRESS CITY - ST - ZIP **DEERFIELD BEACH FL** 1.4 CITY - ST- ZIF DELETE Change Addition 21 TITLE TITLE NAME **BURLEIGH. RUSTY** 2.2 NAME STREET ADDRESS **4840 ROSWELL RD C-300** 2.3 STREET ADDRESS **ATLANTA GA** CITY - ST - ZIP 2 4 CiTY-ST-ZIP DELETE 3.1 71TLE ☐ Change Addition VTSD NAME JOYCE, LINDA 3.2 NAME STREET ADDRESS 10 FAIRWAY DR, SUITE 226 3.3 STREET ADDRESS DEERFIELD BEACH FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition ☐ Change TITLE 4.1 THILE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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