

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000002834

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: SOUTHEASTERN PRINTING COMPANY, INC.

## Current Principal Place of Business:

3601 S.E. DIXIE HWY  
STUART, FL 34997 US

## New Principal Place of Business:

## Current Mailing Address:

3601 S.E. DIXIE HWY  
STUART, FL 34997 US

## New Mailing Address:

FEI Number: 65-0717119

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MADER, DONALD N  
3601 SE DIXIE HWY  
STUART, FL 34997 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: DPT ( ) Delete  
Name: MADER, DONALD N  
Address: 186 ABBIE COURT  
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete  
Name: REGER, LAWRENCE  
Address: 3601 S.E. DIXIE HWY  
City-St-Zip: STUART, FL 34997

Title: S ( ) Delete  
Name: GANNON, DIANA  
Address: 2885 SE ST LUCIE BLVD  
City-St-Zip: STUART, FL 34996

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: MADER, DONALD N  
Address: 106 ABBIE COURT  
City-St-Zip: STUART, FL 34996

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

Title: S (X) Change ( ) Addition  
Name: GANNON, DIANA  
Address: 3601 S.E. DIXIE HWY  
City-St-Zip: STUART, FL 34997

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: DONALD N. MADER

DPT

04/29/2009

Electronic Signature of Signing Officer or Director

Date