

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000083352

1. Entity Name

SOUTHEAST MARKETING ALLIANCE, INC.

FILED
Jun 09, 2000 8:00 am
Secretary of State

06-09-2000 90016 021 ***150.00

Principal Place of Business

2711 BISHOP ESTATES RD
JACKSONVILLE FL 32259
US

Mailing Address

2711 BISHOP ESTATES RD
JACKSONVILLE FL 32259-3007
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3470895

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUDDE, DENNIS
228 CHAUNGER LANE
WINTER HAVEN FL 33884-2341

Name

JENNIFER MILAM

Street Address (P.O. Box Number is Not Acceptable)

2711 Bishop Estates Rd

City

JACKSONVILLE

FL

Zip Code

32259

8. 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

Jennifer Milam
Signature typed or printed name of registered agent and title if applicable.

JENNIFER MILAM

(NOTE: Registered Agent signature required when reinstating)

4-30-00

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
BUDDE, DENNIS
228 CHAUNGER LANE
WINTER HAVEN FL 33884-2341

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PT ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
MILAM, JENNIFER
2711 BISHOP ESTATES RD
JACKSONVILLE FL 32259

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPS ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
BUDDE, CHRIS
228 CHAUNGER LANE
WINTER HAVEN FL 33884

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE M ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
MILAM, JACK R JR
2711 BISHOP ESTATES RD
JACKSONVILLE FL 32259

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jennifer Milam
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JENNIFER MILAM 4-30-00

Date

904-284-4244

Daytime Phone #

CR2E034 (9/99)