

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000081170

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: SOUTHEASTERN PENSION SERVICES, INC.

## Current Principal Place of Business:

9440 PHILIPS HWY  
SUITE 6  
JACKSONVILLE, FL 32256 US

## Current Mailing Address:

300 PRIMERA BOULEVARD  
SUITE 164  
LAKE MARY, FL 32746

FEI Number: 59-3539467

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAMORIELLO, NICHOLAS J  
300 PRIMERA BOULEVARD, SUITE 164  
LAKE MARY, FL 32746 US

## New Principal Place of Business:

1525 INTERNATIONAL PARKWAY  
SUITE 2071  
LAKE MARY, FL 32746 US

## New Mailing Address:

1525 INTERNATIONAL PARKWAY  
SUITE 2071  
LAKE MARY, FL 32746

## Name and Address of New Registered Agent:

LAMORIELLO, NICHOLAS J  
1525 INTERNATIONAL PARKWAY, SUITE 2071  
LAKE MARY, FL 32746 US

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:

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete  
Name: LAMORIELLO, NICHOLAS J  
Address: 300 PRIMERA BOULEVARD, SUITE 164  
City-St-Zip: LAKE MARY, FL 32746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change ( ) Addition  
Name: NEUHAUS, LEONARD A  
Address: 420 LEXINGTON AVE., SUITE 2420  
City-St-Zip: NEW YORK, NY 10170

I hereby certify that the information supplied with this filing does not qualify for the 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: LEONARD A. NEUHAUS

PRES

04/26/2007

Electronic Signature of Signing Officer or Director

Date