

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 06, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000089368

1. Entity Name
WEALTH ADVISORS-SOUTHEAST, INC.



Principal Place of Business
**1713 MAHAN DR.
TALLAHASSEE, FL 32308**

Mailing Address
**1713 MAHAN DR.
TALLAHASSEE, FL 32308**



02052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3569173

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**WEIDNER, RICHARD A
1713 MAHAN DR.
TALLAHASSEE, FL 32308**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WEIDNER, RICHARD A
STREET ADDRESS	1713 MAHAN DR
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	D
NAME	REED, SUMNER A
STREET ADDRESS	1713 MAHAN DR.
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	O
NAME	COX, LUTHER T
STREET ADDRESS	1713 MAHAN DR.
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	O
NAME	APPLEWHITE, SARA G
STREET ADDRESS	4267 LAFAYETTE ST.
CITY-ST-ZIP	MARIANNA, FL 32447
TITLE	D
NAME	DEEB, FRED M
STREET ADDRESS	1713 MAHAN DR
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/14/07-80031-006 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

Richard A. Weidner

2/5/07

850-878-8777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #