

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90364 018 ***150.00

DOCUMENT # P99000088395

1. Entity Name
KSM SOUTHEAST, INC.

Principal Place of Business Mailing Address

2. Principal Place of Business 3. Mailing Address
1840 TUCKER INDUSTRIAL RD. **7307 SANDSCOVE CT.**

Suite, Apt. #, etc. Suite, Apt. #, etc.
 STE. 11

City & State City & State
TUCKER, GA **WINTER PARK, FL**

Zip Country Zip Country
30084 **USA** **32792** **USA**

4. FEI Number Applied For
59-3603554 Not Applicable

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

A0070983

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RICHARD W. COPELAND
631 PALM SPRINGS DRIVE, STE. 115
ALTAMONTE SPRINGS, FL 32701

7. Name and Address of New Registered Agent

Name

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

City FL Zip Code

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 *Richard W. Copeland* DATE **5-10-01**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

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

FILE NOW!!! FEES \$150.00
After MAY 1, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT WILLIAM G. SUTHERLAND P.O. BOX 3222 WINTER PARK, FL 32790 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT WILLIAM G. SUTHERLAND 7307 SANDSCOVE CT., STE. 11 WINTER PARK, FL 32792 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MITCHELL KLEPPE 499 SW 12TH AVENUE BOCA RATON, FL 33486 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOUGLAS S. MCREYNOLDS 4032 GILDER ROSE PLACE WINTER PARK, FL 32792 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RICHARD HUGHES 314 FLAT CREEK CHURCH RD. ELLIJAY, GA 30540 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERT MORALES 141 UNIVERSITY DRIVE ATHENS, GA 30605 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERT CLIFF JONES 2666 CHANCELLOR WAY DULUTH, GA 30136 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JEFFREY MORALES 8304 ALAMO RD. BRENTWOOD, TN 37027 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: *Douglas S. McReynolds* **DOUGLAS S. MCREYNOLDS** **5/1/01** **(407) 679-7044**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR