

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V08365

FILED
Mar 15, 2008
Secretary of State

Entity Name: SOUTHEASTERN FINANCE CORP.

Current Principal Place of Business:

2901 N. PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

2901 NORTH PONCE DE LEON BLVD.
ST AUGUSTINE, FL 32084 US

New Mailing Address:

2901 N. PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084 US

FEI Number: 59-3108400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERT G MCCLELLAN JR
2901 N PONICE DELEON BLVD
ST. AUGUSTINE, FL 32084 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: PD () Delete
Name: MCCLELLAN, ROBERT G
Address: 3213 TURTLE CREEK RD
City-St-Zip: ST AUGUSTINE, FL 32086

Title: ST () Delete
Name: MCCLELLAN, HARRIETTE T
Address: 3213 TURTLE CREEK RD
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: VPD () Delete
Name: MCCLELLAN, TODD A
Address: 117 HIAWATHA COURT
City-St-Zip: PALATKA, FL 32131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ROBERT G MCCLELLAN JR

PD

03/15/2008

Electronic Signature of Signing Officer or Director

Date