

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V46554

FILED
Apr 06, 2007
Secretary of State

Entity Name: SOUTHEAST AERO SERVICES, INC.

Current Principal Place of Business:

4900 US 1 NORTH
ST. AUGUSTINE, FL 32095 US

New Principal Place of Business:

385 HAWKEYE VIEW LANE
ST. AUGUSTINE, FL 32095 US

Current Mailing Address:

P.O. BOX 3209
ST. AUGUSTINE, FL 32085 US

New Mailing Address:

385 HAWKEYE VIEW LANE
ST. AUGUSTINE, FL 32095 US

FEI Number: 59-3130702 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UPCHURCH, FRANK D III
780 N PONCE DE LEON 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: UPCHURCH, KRAMER T
Address: 545 CARCABA RD
City-St-Zip: ST AUGUSTINE, FL

Title: VSTD () Delete
Name: UPCHURCH, SANDRA P
Address: 545 CARCABA RD
City-St-Zip: ST AUGUSTINE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: SANDRA UPCHURCH

VSTD

04/06/2007

Electronic Signature of Signing Officer or Director

Date