Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90160 048 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1400

i. Corporation	NENT # V68439  SE ACQUISITION CORPORA					
Principal Place	e of Business	Mailing Addres	is		<del></del>	
2107 N. PARK / WINTER PARK	AVE.	PO BOX 55465 BIRMINGHAM AL 35205				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 09/22/1992
<ol><li>Principal Pl</li></ol>	lace of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number Applied For
21		26				63-1084920   Not Applicable
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.			5. Certificate of Status Desired
22			[27]			
City & State	e		City & State			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
23 Zin				Country	i	8. This corporation owes the current year Intangible
Zip <b>24</b>	25	29	30	, , , , , , , , , , , , , , , , , , ,		Personal Property Tax.
	9. Name and Address of Currer					10. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324				81 82 83	Street	et Address (P.O. Box Number is Not Acceptable)
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	e of Florida. Such cha ations of, Section 601	inge was author 7.0505, Florida \$	ized by Statutes	tne corp	ed corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered age			tered Ager	nt signature	re required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	P OFFICERS AI	ND DIRECTORS		1.1 TITLE		Change Addition
TITLE	WELDON, CHARLES V. III	_		1.2 NAME		
NAME	1103 21ST STREET SOUTH				T ADDRESS	22
STREET ADDRESS			1.4 CITY-S		~	
CITY-ST-ZIP TITLE			2.1 TITLE		Change Addition	
NAME	WELDEN, WILLIAM B.		I :	2.2 NAME		'
STREET ADDRESS	1103 21ST STREET SOUTH		1	2.3 STREE	TADDRESS	ss
CITY-ST-ZIP			2. 4 CITY-5	T-ZIP		
TITLE			DELETE :	3.1 TITLE	=	☐ Change ☐ Addition
NAME			<b>j</b> :	3.2 NAME		
STREET ADDRESS			:	3 3 STREE	T ADDRESS	38
CITY-ST-ZIP				3.4. CITY- 9	T-ZIP	
TITLE			DELETE	4.1 TITLE		Change Addition
NAME			•	4. 2 NAME		
STREET ADDRESS			1	4.3 STREE	T ADDRESS	ss
CITY-ST-ZIP				4.4 CITY-S	T-ZIP	Change Addition
TITLE		LJ		5.1 TITLE		□ Citalide □ Monitori
NAME				5.2 NAME	T ADDRESS	90
STREET ADDRESS				5.4 CITY-S		»  
CITY-ST-ZIP		<del></del>		6.1 TITLE	-21	☐ Change ☐ Addition
TITLE NAME		<u> </u>	DELETO	6.2 NAME		
NAME	1					1

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

**SIGNATURE:** 

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR