# I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

TREASURER

#### SIGNATURE: BARBARA BONO

Electronic Signature of Signing Officer/Director Detail

## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N09000009762

Entity Name: SOUTHEAST REGIONAL USER GROUP, INC.

#### Current Principal Place of Business:

2655 ULMERTON RD SUITE 101 CLEARWATER, FL 33762

### **Current Mailing Address:**

2655 ULMERTON RD SUITE 101 CLEARWATER, FL 33762

#### FEI Number: 34-1976805

## Name and Address of Current Registered Agent:

TK REGISTERED AGENT, INC. 101 E KENNEDY BLVD SUITE 2700 TAMPA, FL 33602 US

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

Officer/Director	Detail :
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Title	TREASURER	Title	Р
Name	BONO, BARBARA	Name	GOODMAN, SUSAN
Address	2900 ROCKY POINT DR	Address	BAYCARE SYSTEM OFFICE EAST
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	2995 DREW STREET CLEARWATER FL 33759
		Ony Olate Zip.	OLEARWATER TE 33733
Title	VP	Title	S
Name	INTRAVICHIT, JULIETTE	Name	SCHROEDER, DIANA
Address	550 9TH AVENUE S.	Address	1 SHIRCLIFF WAY
City-State-Zip:	ST. PETERSBURG FL 33701		
,		City-State-Zip:	JACKSONVILLE FL 32204
Title	DIRECTOR		
Name	WALL, CHERYL		
Address	4828 AIRPORT CENTER PARKWAY		
City-State-Zip:	CHARLOTTE NC 28208		

#### Certificate of Status Desired: No

FILED Feb 02, 2017 Secretary of State CC9383862756

Date

02/02/2017 Date