

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000139006

**Entity Name:** SOUTHEAST REI LLC

**Current Principal Place of Business:**

3545 ST JOHNS BLUFF RD S #143  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

3545 ST JOHNS BLUFF RD S #143  
JACKSONVILLE, FL 32224

**FEI Number: 81-3388150**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title            MBR  
Name            WEISTER, PATRICK  
Address        3545 ST JOHNS BLUFF RD S #143  
City-State-Zip: JACKSONVILLE FL 32224

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: PATRICK WEISTER**

**PRESIDENT**

**04/11/2017**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date