

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Walker
Secretary of State

APPROVED
AND
FILED

DOCUMENT # **H01490**

(2)

MAY 1 11 9:15

SOUTH EAST LONG LINE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3314 HENDERSON BLVD 100-B
TAMPA FL 33609-2954

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TAMPA FL 33609-2954

DO NOT WRITE IN THIS SPACE

3. Date Incorporated / Amended: **04/24/1984** 3a. Date of Last Report: **04/19/1994**

4. FFI Number: **59-2401424** Applied For: Not Applicable:

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contributions: \$5.00 May Be Added to Fees

8. This corporation has liability for unreported contributions under s. 194.03(2) Florida Statutes: Yes No

21. Principal Office Address	2a. Mailing Address
22. State Agency	27. State Agency
23. City & State	28. City & State
24. City	29. City
25. Country	30. Country

9. Name and Address of Current Registered Agent

WILLIAM K. ELMORE
3314 HENDERSON BLVD 100B
TAMPA FL 33609

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	FL

11. Pursuant to the provisions of Sections 607.0501 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: **WILLIAM K. ELMORE** *William K. Elmore* **5-2-95**

12. OFFICERS AND DIRECTORS

NAME	D
NAME	ANDERSON, KEN
STREET ADDRESS	3314 HENDERSON BLVD 100B
CITY, ST., ZIP	TAMPA FL
NAME	D
NAME	PEPPEL, JERRY
STREET ADDRESS	3314 HENDERSON BLVD 100B
CITY, ST., ZIP	TAMPA FL
NAME	PD
NAME	WHITE, ALBERT
STREET ADDRESS	3314 HENDERSON BLVD 100B
CITY, ST., ZIP	TAMPA FL
NAME	D
NAME	EUBANKS, ROBERT
STREET ADDRESS	3314 HENDERSON BLVD 100B
CITY, ST., ZIP	TAMPA FL
NAME	D
NAME	GLUECK, BILL
STREET ADDRESS	3314 HENDERSON BLVD 100B
CITY, ST., ZIP	TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1. STREET ADDRESS	
1. CITY, ST., ZIP	
2. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. STREET ADDRESS	
2. CITY, ST., ZIP	
3. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3. STREET ADDRESS	
3. CITY, ST., ZIP	
4. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. STREET ADDRESS	
4. CITY, ST., ZIP	
5. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5. STREET ADDRESS	
5. CITY, ST., ZIP	
6. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. STREET ADDRESS	
6. CITY, ST., ZIP	

14. I, the undersigned, certify that the information requested on this filing is voluntarily furnished and that it is true and correct. I understand that the information and data on this report or supplemental annual report is true and accurate and that my signature shall incur the same legal effect as if my name were on the report or supplemental annual report. I understand that the information requested on this report is required by Chapter 607, Florida Statutes, and that the name appears in the Florida Department of State's records as an attachment with an address.

SIGNATURE: *Ken H. Anderson* **Ken H. Anderson** **5-2-95** **813-876-7113**