

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005460

FILED
Apr 18, 2007
Secretary of State

Entity Name: SOUTHEAST LEGAL FOUNDATION, INC.

Current Principal Place of Business:

810 SATURN ST.
#16-164
JUPITER, FL 33477

New Principal Place of Business:

Current Mailing Address:

810 SATURN ST.
#16-164
JUPITER, FL 33477

New Mailing Address:

FEI Number: 65-0707680 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: BERESFORD, JOHN S
Address: 2554 LINCOLN BLVD. #1005
City-St-Zip: VENICE, CA 90291

Title: PD () Delete
Name: PARKER, DAVID
Address: 810 SATURN ST #16-164
City-St-Zip: JUPITER, FL 33477

Title: CD () Delete
Name: ALTSCHULD, BRUCE
Address: 2554 LINCOLN BLVD #1005
City-St-Zip: VENICE, CA 90291

Title: D () Delete
Name: LONG, HARRISON
Address: 2554 LINCOLN BLVD. #1005
City-St-Zip: VENICE, CA 90291

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CD (X) Change () Addition
Name: PRICE, HOWARD
Address: 2554 LINCOLN BLVD #1005
City-St-Zip: VENICE, CA 90291

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

SIGNATURE: JOHN S. BERESFORD

SD

04/18/2007

Electronic Signature of Signing Officer or Director

_____ Date