

1.) CORPORATION NAME:

SOUTHEAST POWER CORPORATION

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1627506**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

FL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1805 HAMMOCK RD

CITY/ST/ZIP: TITUSVILLE, FL 32796

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: JOHN W DAVIS III TITLE: PRESIDENT ADDRESS: 1805 HAMMOCK RD CITY/ST/ZIP/CO: TITUSVILLE, FL 32796	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JACK E BRADY TITLE: VICE PRESIDENT ADDRESS: 125 BEST DRIVE CITY/ST/ZIP/CO: SPARTANBURG, SC 29303	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JASON P JOHNSTON TITLE: VICE PRESIDENT ADDRESS: 1805 HAMMOCK RD CITY/ST/ZIP/CO: TITUSVILLE, FL 32796	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JACK L MOORE TITLE: VICE PRESIDENT ADDRESS: 1192 HWY 304 CITY/ST/ZIP/CO: BASTROP, TX 78602	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: ZANE E TAYLOR TITLE: VICE PRESIDENT ADDRESS: 1805 HAMMOCK RD CITY/ST/ZIP/CO: TITUSVILLE, FL 32796	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: STEPHEN R WHERRY TITLE: TREASURER ADDRESS: 1684 W HIBISCUS BLVD CITY/ST/ZIP/CO: MELBOURNE, FL 32901	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: MARY L MANGER TITLE: SECRETARY ADDRESS: 1684 W HIBISCUS BLVD CITY/ST/ZIP/CO: MELBOURNE, FL 32901	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: HARVEY C EADS, JR TITLE: DIRECTOR ADDRESS: 1684 W HIBISCUS BLVD CITY/ST/ZIP/CO: MELBOURNE, FL 32901	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: DANFORTH E LEITNER TITLE: DIRECTOR ADDRESS: 1684 W HIBISCUS BLVD CITY/ST/ZIP/CO: MELBOURNE, FL 32901	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: JOHN H SOTTILE TITLE: DIRECTOR ADDRESS: 1684 W HIBISCUS BLVD CITY/ST/ZIP/CO: MELBOURNE, FL 32901	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ STEPHEN R WHERRY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	STEPHEN R WHERRY, TREASURER PRINTED NAME AND CORPORATE TITLE
5/20/2014 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	