2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 11, 2008 8:00 am Secretary of State

1. Entity Nam	MENT # 732327 COSUKEE LAND CO-OP, IN	IC.					4-11-2008 90	•			
9601 MICCOSUKEE RD #23A 96			ailing Address 601 MICCOSUKEE RD #23A ALLAHASSEE, FL 32309			# 10					
2. Principal Place of Business - No P.O. Box # 3.		3. Mailing Address	Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				02112008	Chg-NP	CR2E03	37 (12/06)		
City & State		City & State				4. FEI Number 59-16266	884		1	plied For t Applicable	
Zip	Country	Zip	Co	untry		5. Certificate of	Status Desired		\$8.75 Add	litional	
	6. Name and Address of Current R	legistered Agent		T		7. Name and A	ddress of New R				
HERMANN, FRESE 9601 MICCOSUKEE ROAD, 32 TALLAHASSEE, FL 32309				Name Street Address (P.O. Box Number is Not Acceptable)							
				City				FL	Zip Cod	6	
SIGNATURE	Signature, typed or printed name of registered agent at Filling Fee is \$61.25 Due by May 1, 2008	9. Election		Financing		when reinstating) \$5.00 May Be Added to Fees	I		c payable to		
10.	OFFICERS AND DIR	ECTORS	11.			ADDITIONS/CHAN	IGES TO OFFICE	RS AND DI	RECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FRASE, HERMAN 9601-32 MICCOSUKEE RD. TALLAHASSEE, FL 32309	. Delete			P Fre 900	se, Hermi 1-32 Micc lahassee, 1	unn osukee Ro Fl. 3230	L 54	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LYONS, JUDITH 9601 -55 MICCOSUKEE RD TALLAHASSEE, FL 32309	☐ Delete			,	<u> </u>		_	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RYCHLIK, SARAH 9601 MICCOSUKEE RD., #68 TALLAHASSEE, FL 32309	☐ Delete	STR	.E AE '_ EET ADDRESS Y-ST-ZIP					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SAWON, BRIAN 9601-85 MICCOSUKEE RD. TALLAHASSEE, FL 32309	■ Delete			Lina 960 Tal	da Deaton 11 Miccosul 12 Massee	kee Rd# FL 32	25 .309	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRESTON, HOWARD 9601 MICCOSUKEE RD SUITE 4 TALLAHASSEE, FL 32309	☐ Delete					J ———		☐ Change	☐ Addition	
TITLE NAME		☐ Delete	TITI	F					Change	☐ Addition	

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 🔬

Anda Weaton

Linda Deaton

4/8/09 (850)

<u>(850)877-6628</u>