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Apr 09 1997 8:00am
Secretary of State



NONPROFIT CORPORATION
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 790275 (2)
1. Corporation Name
SUWANNEE VALLEY ELECTRIC COOPERATIVE, INC.



Principal Place of Business Mailing Address
1725 S. OHIO AVE. PO BOX 160
LIVE OAK FL 32060 LIVE OAK FL 32060-0160

3. Date Incorporated or Qualified 06/12/1967
3a. Date of Last Report 02/12/1996

21	2. Principal Place of Business	2a. Mailing Address	26	4. FEI Number	59-0472323	Applied For	Not Applicable
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.	27	5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required	
23	City & State	City & State	28	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees	
24	Zip	Country	29	30	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MARTIN, JERRY 1725 SOUTH OHIO AVENUE LIVE OAK FL 32060				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: *Jerry Martin* Jerry Martin, General Manager 04/02/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	TD	<input type="checkbox"/> DELETE	1.1 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	POUCHER, GEORGE		1.2 NAME	POUCHER, GEORGE			
STREET ADDRESS	RT 2 BOX 180		1.3 STREET ADDRESS	3966 72ND ST			
CITY-ST-ZIP	LIVE OAK FL		1.4 CITY-ST-ZIP	LIVE OAK, FL 32060			
TITLE	VD	<input type="checkbox"/> DELETE	2.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WALKER, J.C.		2.2 NAME	WALKER, J C			
STREET ADDRESS	P.O. BOX 116 N/A		2.3 STREET ADDRESS	P O BOX 116 N/A			
CITY-ST-ZIP	BRANFORD FL		2.4 CITY-ST-ZIP	BRANFORD, FL 32008			
TITLE	SD	<input type="checkbox"/> DELETE	3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SCOTT, R.H., JR.		3.2 NAME	SCOTT, R H, JR			
STREET ADDRESS	14136 76TH STREET		3.3 STREET ADDRESS	14136 76TH ST			
CITY-ST-ZIP	LIVE OAK FL		3.4 CITY-ST-ZIP	LIVE OAK, FL 32060			
TITLE	D	<input type="checkbox"/> DELETE	4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WARD, A.L.		4.2 NAME	WARD, A L			
STREET ADDRESS	RT 1 BOX 737		4.3 STREET ADDRESS	15673 189TH ROAD			
CITY-ST-ZIP	MCALPIN FL		4.4 CITY-ST-ZIP	MCALPIN, FL 32062			
TITLE	D	<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BELL, DOYLE		5.2 NAME				
STREET ADDRESS	ROUTE 1 BOX 689		5.3 STREET ADDRESS				
CITY-ST-ZIP	MAYO FL		5.4 CITY-ST-ZIP				
TITLE	PD	<input type="checkbox"/> DELETE	6.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BLAIR, ALTON		6.2 NAME	BLAIR, ALTON			
STREET ADDRESS	RT. 3 BOX 176		6.3 STREET ADDRESS	RT 3 BOX 176			
CITY-ST-ZIP	JASPER FL		6.4 CITY-ST-ZIP	JASPER, FL 32052			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *George E. Poucher* 04/03/97 (904)362-2226
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0000723

CR2E037 (9/96)

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REGISTRATION DATE: 06/12/1967
FEI NUMBER: 59-0472323
CORPORATE NAME: SUWANNEE VALLEY ELECTRIC COOPERATIVE, INC.
1725 SOUTH OHIO AVE.
LIVE OAK FL 32060
REGISTERED AGENT: JERRY MARTIN
1725 SOUTH OHIO AVE.
LIVE OAK FL 32060
OFFICERS/DIRECTORS (CONT.)
SD
STANSEL, DWIGHT
5386 164TH STREET
WELLBORN FL 32094
VD
HUNTER, HUGH
RT 4 BOX 63
JASPER FL 32052
D
HART, W F
RT 3 BOX 72
MAYO FL 32066
D
UDELL, ISADORE
RT 1 BOX 8070
WHITE SPRINGS FL 32096