2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# 790278

Entity Name: SUMTER ELECTRIC COOPERATIVE, INC.

Current Principal Place of Business:

P.O. BO 301
330 S. US HWY 301
SUMTERVILLE, FL 335850301 US

New Principal Place of Business:

Current Mailing Address:

DUNCAN, JAMES P
P.O. BOX 301
SUMTERVILLE, FL 33585 US

New Mailing Address:

FEI Number: 59-0469125 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DUNCAN, JAMES P.
330 SOUTH US HWY 301
SUMTERVILLE, FL 33585 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:	V	( ) Delete
Name:	VICK, RAY F	
Address:	1210 S WATERVIEW DR	
City-St-Zip:	INVERNESS, FL 34450	
Title:	D	( ) Delete
Name:	SANTEE, DONALD W	
Address:	3804 EVERSHOLT STREET	
City-St-Zip:	CLERMONT, FL 34711	
Title:	D	( ) Delete
Name:	BOYATT, DILLARD B	
Address:	209 JASPER ST	
City-St-Zip:	BUSHNELL, FL 33513	
Title:	P	( ) Delete
Name:	SHEPPARD, WILSON G	
Address:	32215 SENESE ROAD	
City-St-Zip:	SORRENTO, FL 32776	
Title:	D	( ) Delete
Name:	MUFFETT, EARL	
Address:	4680 SE 166TH ST	
City-St-Zip:	SUMMERFIELD, FL 34491	
Title:	D	( ) Delete
Name:	HATFIELD, JERRY D	
Address:	39901 SKYLINE DR	
City-St-Zip:	UMATILLA, FL 32784	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	HATFIELD, JERRY D	
Address:	39901 SKYLINE DR	
City-St-Zip:	UMATILLA, FL 32784	

I hereby certify that the information supplied with this filing does not qualify 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: WILSON G. SHEPPARD PRES 01/08/2009
Electronic Signature of Signing Officer or Director — Date