

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790363

FILED
Jul 05, 2005
Secretary of State

Entity Name: TALQUIN ELECTRIC COOPERATIVE, INC.

Current Principal Place of Business:

1640 WEST JEFFERSON ST.
QUINCY, FL 323512134

New Principal Place of Business:

Current Mailing Address:

PO BOX 1679
QUINCY, FL 323531679

New Mailing Address:

FEI Number: 59-0474475 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STALLONS, GARY
1640 W. JEFFERSON STREET
QUINCY, FL 32351 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: D () Delete
Name: ENGLISH, COLIN JR.,
Address: 4267 ENGLISH LN
City-St-Zip: TALLAHASSEE, FL 32301

Title: P () Delete
Name: GREEN, MAL,
Address: 7882 BANDITS RUN
City-St-Zip: TALLAHASSEE, FL 32308

Title: ST () Delete
Name: LEWIS, BERNARD,
Address: 591 LEWIS LANE
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: FENN, SAMUEL,
Address: 3539 LAKEVIEW RD.
City-St-Zip: TALLAHASSEE, FL

Title: V () Delete
Name: SUMNER, AMOS,
Address: 19506 NE OLD BLUE CREEK RD
City-St-Zip: HOSFORD, FL 32334

Title: D () Delete
Name: STRICKLAND, BOBBY J
Address: 108 COLEMAN RD
City-St-Zip: CRAWFORDVILLE, FL 32327

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: () 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 Section 119.07(3)(i), 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: MAL GREEN

_____ Electronic Signature of Signing Officer or Director

P

07/05/2005

_____ Date