

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008019

FILED
Feb 17, 2011
Secretary of State

Entity Name: REGIONAL COOPERATIVE ALLIANCE, INC.

Current Principal Place of Business:

4000 GATEWAY CENTRE BLVD
SUITE 100
PINELLAS PARK, FL 33782 US

New Principal Place of Business:

Current Mailing Address:

4000 GATEWAY CENTRE BLVD
SUITE 100
PINELLAS PARK, FL 33782 US

New Mailing Address:

FEI Number: 66-0033581

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUMARIEGA, MANNY L EX.DIR.
4000 GATEWAY CENTRE BLVD
SUITE 100
PINELLAS PARK, FL 33782 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
Name: MARIANO, JACK
Address: 7530 LITTLE ROAD, STE. 340
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: ST
Name: MINNING, BOB
Address: 120-108TH AVE.
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: VCHA
Name: BUSTLE, LARRY
Address: PO BOX 1000
City-St-Zip: BRADENTON, FL 34206 US

Title: D
Name: KERSTEEN, BOB
Address: 2821 61ST LANE NO.
City-St-Zip: ST. PETERSBURG, FL 33710 US

Title: D
Name: TODD, BARBARA S
Address: 6107 100TH WAY NORTH
City-St-Zip: SAINT PETERSBURG, FL 33708 US

Title: C
Name: DODSON, BILL
Address: 1708 TURKEY CREEK ROAD
City-St-Zip: PLANT CITY, FL 33566 US

I hereby 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 all other like empowered.

SIGNATURE: LAWRENCE BUSTLE

VCHA

02/17/2011

Electronic Signature of Signing Officer or Director

Date