

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Mar 01, 1999 8:00 am**  
**Secretary of State**

03-01-1999 90009 015 \*\*\*\*61.25

0060707

NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N95000002357**

1. Corporation Name  
**MOLOKAI CO-OP, INC.**

Principal Place of Business 1 HAWAIIAN WAY LEESBURG FL 34788 US	Mailing Address 1 HAWAIIAN WAY LEESBURG FL 34788 US
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21. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 05/15/1995
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	4. FEI Number 59-3317542
23. City & State	28. City & State	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
24. Zip	29. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>

9. Name and Address of Current Registered Agent NEWMAN, RICHARD P. 1000 WEST MAIN STREET LEESBURG FL 34748	10. Name and Address of New Registered Agent 81 Name Paul L. Wean 82 Street Address (P.O. Box Number is Not Acceptable) 1305 East Robinson Street 83 Suite A 84 City Orlando FL 85 Zip Code 32801
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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 *Paul L. Wean* Paul L. Wean DATE 1/27/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUPUIS, GERARD	1.2 NAME	
STREET ADDRESS	191 PARADISE NORTH	1.3 STREET ADDRESS	
CITY-ST-ZIP	LEESBURG FL	1.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARKLESS, WANDA	2.2 NAME	
STREET ADDRESS	142 MALAYON WAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	LEESBURG FL 34788	2.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	2nd V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHAW, DOROTHY	3.2 NAME	Batten, Frank
STREET ADDRESS	56 KONA CIRCLE	3.3 STREET ADDRESS	190 Paradise North
CITY-ST-ZIP	LEESBURG FL	3.4 CITY-ST-ZIP	Leesburg, Fl. 34788
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WOOD, MARY	4.2 NAME	Robinson, Harold
STREET ADDRESS	29 HAWAIIAN WAY	4.3 STREET ADDRESS	236 Kelou Court
CITY-ST-ZIP	LEESBURG FL 34788	4.4 CITY-ST-ZIP	Leesburg, Fl. 34788
TITLE	TD <input checked="" type="checkbox"/> DELETE	5.1 TITLE	T/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FAULHABER, LOUIS	5.2 NAME	Taylor, Duane
STREET ADDRESS	73 MAUNA LOA DRIVE	5.3 STREET ADDRESS	164 Ka Lama Place
CITY-ST-ZIP	LEESBURG FL	5.4 CITY-ST-ZIP	Leesburg, Fl. 34788
TITLE	VD <input checked="" type="checkbox"/> DELETE	6.1 TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VAUGHN, HAROLD	6.2 NAME	Vogler, Alfred
STREET ADDRESS	79 MAUNA LOA DRIVE	6.3 STREET ADDRESS	284 Kelou Court
CITY-ST-ZIP	LEESBURG FL	6.4 CITY-ST-ZIP	Leesburg, Fl. 34788

14. I 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, with all other like empowered.

SIGNATURE: Gerard Dupuis *Gerard Dupuis* 1/27/99 352-343-5300

CR2E037 (11/98)