

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008
Secretary of State

DOCUMENT# N95000002357

Entity Name: MOLOKAI CO-OP, INC.

Current Principal Place of Business:

1 HAWAIIAN WAY
LEESBURG, FL 34788 US

New Principal Place of Business:

Current Mailing Address:

1 HAWAIIAN WAY
LEESBURG, FL 34788 US

New Mailing Address:

FEI Number: 59-3317542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWMAN, RICHARD P
1000 WEST MAIN ST.
LEESBURG, FL 34748 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: 1VP () Delete
Name: FARRELL, JOHN
Address: 53 KONO CIRCLE
City-St-Zip: LEESBURG, FL 34788

Title: P () Delete
Name: WOOD, MARY L
Address: 29 HAWAIIAN WAY
City-St-Zip: LEESBURG, FL 34788

Title: 2VP () Delete
Name: DEOPERE, FRANKLIN
Address: 19 HAWAIIAN WAY
City-St-Zip: LEESBURG, FL 34788

Title: D () Delete
Name: LEAVER, MURRAY
Address: 59 KONO CIRCLE
City-St-Zip: LEESBURG, FL 34788

Title: T () Delete
Name: SHAW, MARK
Address: 56 KONO CIRCLE
City-St-Zip: LEESBURG, FL 34788

Title: D () Delete
Name: FETHER, JACQUELIN
Address: 74 MAUNA LOA
City-St-Zip: LEESBURG, FL 34788

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: 1VP (X) Change () Addition
Name: DEOPERE, FRANK L 1ST VP
Address: 19 HAWAIIAN WAY
City-St-Zip: LEESBURG, FL 34788

Title: P (X) Change () Addition
Name: NOEL, OSCAR A PRES.
Address: 184 PARADISE NORTH
City-St-Zip: LEESBURG, FL 34788

Title: 2VP (X) Change () Addition
Name: LEAVER, MURRAY A 2ND VP
Address: 59 KONO CIRCLE
City-St-Zip: LEESBURG, FL 34788

Title: T (X) Change () Addition
Name: SHAW, MARK B TREAS
Address: 56 KONO CIRCLE
City-St-Zip: LEESBURG, FL 34788

Title: SEC' (X) Change () Addition
Name: SANTI, MILDRED M SEC'Y
Address: 147 MALAYON WAY
City-St-Zip: LEESBURG, FL 34788

Title: AT (X) Change () Addition
Name: ELLIOTT, KENWOOD D AST.TRE
Address: 219 PARADISE SOUTH
City-St-Zip: LEESBURG, FL 34788

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: OSCAR A. NOEL, PRESIDENT

PRES

02/11/2008

Electronic Signature of Signing Officer or Director

_____ Date