

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 09, 2007
Secretary of State**

DOCUMENT# N95000004063

Entity Name: COLEMAN FEDERAL CORRECTIONAL COMPLEX EMPLOYEES' CLUB, INC.

Current Principal Place of Business:

COLEMAN FEDERAL CORRECTIONAL COMPLEX
846 NE 54TH TERRACE
COLEMAN, FL 33521

New Principal Place of Business:

Current Mailing Address:

COLEMAN FEDERAL CORRECTIONAL COMPLEX
846 NE 54TH TERRACE
COLEMAN, FL 33521

New Mailing Address:

FEI Number: 59-3337356 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:

ADAMS, FELIX M
236 N MAIN STREET
BUSHNELL, FL 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: P () Delete
Name: HAYS, ROGER
Address: 846 NE 54 TERR
City-St-Zip: COLEMAN, FL 33521

Title: VP () Delete
Name: PEPPERS, ROBERT
Address: 846 NE 54 TERR
City-St-Zip: COLEMAN, FL 33521

Title: T () Delete
Name: BAILEY, GWENDOLYN
Address: 846 NE 54 TERR
City-St-Zip: COLEMAN, FL 33521

Title: S () Delete
Name: DIPAULA, WANDA
Address: 846 NE 54 TERR
City-St-Zip: COLEMAN, FL 33521

Title: VP () Delete
Name: MARTIN, RICHARD
Address: 846 NE 54 TERR
City-St-Zip: COLEMAN, FL 33521

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARTIN, RICHARD
Address: 846 NE 54 TERR
City-St-Zip: COLEMAN, FL 33521

Title: VP (X) Change () Addition
Name: LEE, ROBERT
Address: 846 NE 54 TERR
City-St-Zip: COLEMAN, FL 33521

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: CASINO, DIANA
Address: 846 NE 54 TERR
City-St-Zip: COLEMAN, FL 33521

Title: VP (X) Change () Addition
Name: LORENZO, JOHNNY
Address: 846 NE 54 TERR
City-St-Zip: COLEMAN, FL 33521

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: GWENDOLYN BAILEY

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05/09/2007

Electronic Signature of Signing Officer or Director

_____ Date