

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 791134

FILED
Feb 03, 2007
Secretary of State

Entity Name: FLORIDA COUNCIL OF COOPERATIVES

Current Principal Place of Business:

330N BREVARD AVE
ARCADIA, FL 34266 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 213069
ROYAL PALM BEACH, FL 33421 US

New Mailing Address:

FEI Number: 59-1775969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICE, DON A
P.O. BOX 5559
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

RICE, DON A
11903 SOUTHERN BLVD
SUITE 200
ROYAL PALM BEACH, FL 33411 US

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: DON RICE

02/03/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BRIDGES, DAVID
Address: 330 BREVARD AVE
City-St-Zip: ARCADIA, FL 34266

Title: TR () Delete
Name: RICE, DON
Address: 1055 HERITAGE FARMS ROAD
City-St-Zip: LAKE WORTH, FL 33467 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TR (X) Change () Addition
Name: RICE, DON
Address: 11903 SOUTHERN BLV., SUITE 200
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

I hereby certify that the information supplied with this filing does not qualify for the 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: DON RICE

TR

02/03/2007

Electronic Signature of Signing Officer or Director

Date