

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732327

Entity Name: THE MICCOSUKEE LAND CO-OP, INC.

Current Principal Place of Business:

9601 MICCOSUKEE RD #23A
TALLAHASSEE, FL 32309

Current Mailing Address:

9601 MICCOSUKEE RD #23A
TALLAHASSEE, FL 32309 US

FEI Number: 59-1626684

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCGRATH, KELLY
9601 MICCOSUKEE RD #41
TALLAHASSEE, FL 32309 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PRESIDENT
Name DENHOLM, JULYA
Address 9601 MICCOSUKEE RD, MLC-5
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name BRUDENELL, MARLENE
Address 9601 MICCOSUKEE RD. #12
City-State-Zip: TALLAHASSEE FL 32309

Title SECRETARY, DIRECTOR
Name RYCHLIK, SARAH
Address 9601 MICCOSUKEE RD #68
City-State-Zip: TALLAHASSEE FL 32309

Title TREASURER
Name DEATON, LINDA
Address 9601 MICCOSUKEE RD #25
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name KELLEY, ROSE
Address 9601 MICCOSUKEE RD #47
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name LOMBARDO, EIRIN
Address 3874 IMAGINARY RD
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name LYONS, JUDITH
Address 9601 MICCOSUKEE RD. #56
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name MCGRATH, KELLY
Address 9601 MICCOSUKEE RD #41
City-State-Zip: TALLAHASSEE FL 32309

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: LINDA DEATON

TREASURER

02/27/2014

Electronic Signature of Signing Officer/Director Detail

Date