

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732327

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

Current Principal Place of Business:

9623 LAND CO-OP RD
TALLAHASSEE, FL 32309

Current Mailing Address:

9623 LAND CO-OP RD
TALLAHASSEE, FL 32309 US

FEI Number: 59-1626684

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCGRATH, KELLY
11010 BLACK CREEK LN
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, DIRECTOR
Name ROSE, KAREN M
Address 3880 BEECHNUT GUM TRL
City-State-Zip: TALLAHASSEE FL 32309

Title SECRETARY, DIRECTOR
Name KELLY, JASMINE
Address 3837 LONG AND WINDING RD
City-State-Zip: TALLAHASSEE FL 32309

Title TREASURER
Name WOOD, BRITTANY
Address 3923 LONG AND WINDING RD
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name FRESE, TINA
Address 3860 BEECHNUT GUM TRL
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name DEATON, ED
Address 9471 AVENIDA DE LA LUNA
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name REEVES, ADAM
Address 3923 LONG AND WINDING RD
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name ATHERTON, SCOTT
Address 3837 LONG AND WINDING RD
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name HOWARD, FOX
Address 11010 MCCRACKEN RD
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: SCOTT ATHERTON

BOOKKEEPER

04/30/2022

Electronic Signature of Signing Officer/Director Detail

Date