## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 790363** 

Entity Name: TALQUIN ELECTRIC COOPERATIVE, INC.

**Current Principal Place of Business:** 

1640 WEST JEFFERSON ST. QUINCY, FL 32351-2134

**Current Mailing Address:** 

PO BOX 1679

QUINCY, FL 32353-1679 US

FEI Number: 59-0474475 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BENSLEY, TRACY A 1640 W. JEFFERSON STREET QUINCY, FL 32351-2134 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

**FILED** Jan 25, 2016

**Secretary of State** 

CC6045738966

Officer/Director Detail:

Title Title P, PRESIDENT

GREEN, MAL DURDEN, CARRIE L Name Name

1640 WEST JEFFERSON ST. 1640 WEST JEFFERSON ST. Address Address

City-State-Zip: QUINCY FL 32351-2134 QUINCY FL 32351-2134 City-State-Zip:

Title D Title S

Name STRICKLAND, BOBBY J Name ALEXANDER, JOSEPH Address 1640 WEST JEFFERSON ST. Address 1640 WEST JEFFERSON ST. QUINCY FL 32351-2134 City-State-Zip: City-State-Zip: QUINCY FL 32351-2134

VΡ Title Title D

Name VANLANDINGHAM, BILLY FENN. SAMUEL J Name Address 1640 WEST JEFFERSON ST. 1640 WEST JEFFERSON ST. Address QUINCY FL 32351-2134

City-State-Zip: QUINCY FL 32351-2134 City-State-Zip:

Title DIRECTOR Title DIRECTOR BRUCE, DOUG Name BRISTOL, CLIFFORD Name

1640 WEST JEFFERSON ST. Address 1640 WEST JEFFERSON ST. Address City-State-Zip: QUINCY FL 32351-2134 QUINCY FL 32351-2134 City-State-Zip:

Continues on page 2

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: DURDEN, CARRIE L

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

01/25/2016

Date

## Officer/Director Detail Continued:

Title DIRECTOR Name WRIGHT, DAVID

1640 WEST JEFFERSON ST. Address

City-State-Zip: QUINCY FL 32351-2134