

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 791134

Entity Name: FLORIDA COUNCIL OF COOPERATIVES

Current Principal Place of Business:

1841 WEST HOWARD STREET
LIVE OAK, FL 32064

Current Mailing Address:

P.O. BOX 610
LIVE OAK, FL 32064 US

FEI Number: 59-1775969

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAWRENCE, TODD A
1841 WEST HOWARD STREET
LIVE OAK, FL 32064 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 PD
Name TODD, LAWRENCE
Address P.O. BOX 610
City-State-Zip: LIVE OAK FL 32064

Title TR
Name FAGERQUIST, THOMAS
Address 11903 SOUTHERN BLV., SUITE 200
City-State-Zip: ROYAL PALM BEACH FL 33411

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: TODD LAWRENCE

PRESIDENT

06/10/2014

Electronic Signature of Signing Officer/Director Detail

Date