

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002357

Entity Name: MOLOKAI CO-OP, INC.

Current Principal Place of Business:

1 HAWAIIAN WAY
LEESBURG, FL 34788

FILED
Mar 15, 2018
Secretary of State
CC2592468974

Current Mailing Address:

1 HAWAIIAN WAY
LEESBURG, FL 34788 US

FEI Number: 59-3317542

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEWMAN, RICHARD P
1000 WEST MAIN ST.
LEESBURG, FL 34748 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 2ND VICE PRESIDENT, DIRECTOR
Name LEAVER, MURRAY
Address 59 KONO CIRCLE
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR
Name DENOMME, WILL
Address 45 HAWAIIAN WAY
City-State-Zip: LEESBURG FL 34788

Title TREASURER, DIRECTOR
Name ESKELIN, ALLAN
Address 137 MALAYON WAY
City-State-Zip: LEESBURG FL 34788

Title SECRETARY, DIRECTOR
Name GRIFFITH, LINDA
Address 152 MALAYON WAY
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR
Name BECK, TIMOTHY
Address 79 MAUNA LOA DRIVE
City-State-Zip: LEESBURG FL 34788

Title 1ST VICE PRESIDENT, DIRECTOR
Name JOVENALL, JAMES
Address 133 MALAYON WAY
City-State-Zip: LEESBURG FL 34788

Title PRESIDENT, DIRECTOR
Name BROWN, MICKEY
Address 1 HAWAIIAN WAY
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR
Name COERS, EDDIE
Address 1 HAWAIIAN WAY
City-State-Zip: LEESBURG FL 34788

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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: MICKEY BROWN

PRESIDENT

03/15/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, ASSISTANT TREASURER
Name NUTT, JENNIFER
Address 62 KONO CIRCLE
City-State-Zip: LEESBURG FL 34788