2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: Ew 7 Holge

Secretary of State DOCUMENT #709430 01-14-2005 90009 040 ****70.00 SUWANNEE RIVER ECONOMIC COUNCIL, INC. Principal Place of Business Mailing Address 50002661 1171 NOBLES FERRY ROAD 1171 NOBLES FERRY ROAD P O BOX 70 P O BOX 70 LIVE OAK, FL 32064 US LIVE OAK, FL 32064 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01062005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-1101989 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TERRY, FRANCES L. 1171 NOBLES FERRY ROAD Street Address (P.O. Box Number is Not Acceptable) LIVE OAK, FL 32060 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Due by May 1, 2005 Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE ☐ Change ☐ Addition JOHNSON, VERNEIL G. NAME MALIF STREET ADORESS 19520 168TH STREET STREET ADDRESS CITY-ST-ZIP LIVE OAK, FL 32060 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME HODGES, E.W. JR NAME STREET ADDRESS 7886 SW CR 18 STREET ADDRESS CITY-ST-ZIP HAMPTON, FL 32044 CITY-ST-ZIP TITLE (X) Delete TITLE ☐ Change Addition NAME MILLER, MINNIE MARY LEE NAME STREET ADDRESS ROUTE 1, BOX 254 STREET ADDRESS 5883 SUWANNEE VALLEY ROAD-CITY-ST-ZIP GREENVILLE, FL 32331 WELLB ORN, FLORIDA 32094 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME LYONS, RICKY NAME P.O. BOX 88 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MAYO, FL 32066 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME SWISHER, JIMMY NAME STREET ADDRESS RTE 15, BOX 3058 STREET ADDRESS CITY-ST-71P LAKE CITY, FL 32055 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME TILLIS, RICHARD O NAME STREET ADDRESS PO BOX 777 STREET ADDRESS LAKE BUTLER, FL 32054 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

E.W. Hodges, Jr., President

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

-8105

386-362-4115

FILED Jan 14, 2005 8:00 am