

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # 709430**

1. Entity Name  
**SUWANNEE RIVER ECONOMIC COUNCIL, INC.**



Principal Place of Business  
**1171 NOBLES FERRY ROAD  
P O BOX 70  
LIVE OAK, FL 32064 US**

Mailing Address  
**1171 NOBLES FERRY ROAD  
P O BOX 70  
LIVE OAK, FL 32064 US**



01112008 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-1101989**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**TERRY, FRANCES L.  
1171 NOBLES FERRY ROAD  
LIVE OAK, FL 32060**

**DO NOT WRITE  
IN THIS SPACE**

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

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
JOHNSON, VERNEIL G.  
19520 168TH STREET  
LIVE OAK, FL 32060**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
HODGES, E W, JR  
7886 SW CR 18  
HAMPTON, FL 32044**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
KEARNEY, CHARLOTTE  
PO BOX 733  
TRENTON, FL 32693**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
LYONS, RICKY  
P.O. BOX 88  
MAYO, FL 32066**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
SWISHER, JIMMY  
RTE 15, BOX 3058  
LAKE CITY, FL 32055**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
TILLIS, RICHARD O  
PO BOX 777  
LAKE BUTLER, FL 32054**

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02/05/08-80057-011 70.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: *E W Hodges Jr*

**E. W. Hodges, Jr., President 1/14/08 386-362-4115, ext. 223**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #