

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712647

FILED
Mar 01, 2011
Secretary of State

Entity Name: LOUGHMAN CIVIC CENTER, INC.

Current Principal Place of Business:

6216 CR 547 NORTH
LOUGHMAN, FL 33858 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 582
LOUGHMAN, FL 33858 US

New Mailing Address:

FEI Number: 59-3293222

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRABBS, ROBERT O
427 FL AVE.
LOUGHMAN, FL 33858 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VPD
Name: COMBS, GLEN
Address: 3327 HIGHWAY 547 NORTH
City-St-Zip: DAVENPORT, FL 33837

Title: PD
Name: CRABBS, ROBERT O
Address: 427 FL AVE.
City-St-Zip: LOUGHMAN, FL 33858

Title: SD
Name: COMBS, BETTY
Address: 3327 HIGHWAY 547N
City-St-Zip: DAVENPORT, FL 33837

Title: TD
Name: REDGRAVE, PAT B
Address: 711 REDGRAVE RD.
City-St-Zip: LOUGHMAN, FL 33858

Title: D
Name: CRABBS, MARY
Address: 427 FL AVE
City-St-Zip: LOUGHMAN, FL 33858

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: PAT B REDGRAVE

TD

03/01/2011

Electronic Signature of Signing Officer or Director

Date