2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# 713272

Entity Name: CROOM-A-COOCHEE IMPROVEMENT CLUB, INC.

Current Principal Place of Business:

12621 CR 687
WEBSTER, FL 33597

New Principal Place of Business:

Current Mailing Address:

4386 SW 127TH ROAD
WEBSTER, FL 33597 US

New Mailing Address:

FEI Number: 59-2380672 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAKER, JOANNE A
4386 SW 127TH ROAD
WEBSTER, FL 33597 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:	P	( ) Delete
Name:	BAKER, KEN	
Address:	4386 SW 127TH ROAD	
City-St-Zip:	WEBSTER, FL 33597	
Title:	VP	( ) Delete
Name:	SEESE, ANDY	
Address:	12344 CR 684	
City-St-Zip:	WEBSTER, FL 33597	
Title:	TD	( ) Delete
Name:	BAKER, JOANNE A	
Address:	4386 SW 127TH ROAD	
City-St-Zip:	WEBSTER, FL 33597	
Title:	S	( ) Delete
Name:	VAN TOL, DARLENE	
Address:	4786 SW 122 LANE	
City-St-Zip:	WEBSTER, FL 33597	
Title:	D	( ) Delete
Name:	ANDES, WALTER	
Address:	12604 CR 681	
City-St-Zip:	WEBSTER, FL 33597	
Title:	D	( ) Delete
Name:	YOUNG, BEATRICE	
Address:	12327 CR 684	
City-St-Zip:	WEBSTER, FL 33597	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	FLOYD, JOANN	
Address:	3928 CR 656	
City-St-Zip:	WEBSTER, FL 33597	
Title:	D	(X) Change ( ) Addition
Name:	LACY, HARLAN	
Address:	2472 CR 691	
City-St-Zip:	WEBSTER, FL 33597	
Title:	D	(X) Change ( ) Addition
Name:	JONES, KEN	
Address:	2472 CR 691	
City-St-Zip:	WEBSTER, FL 33597	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOANNE A BAKER TD 01/07/2009

Electronic Signature of Signing Officer or Director — Date