2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2011
Secretary of State

DOCUMENT# 721122

Entity Name: THE WAKULLA COUNTY SENIOR CITIZENS COUNCIL, INC.

Current Principal Place of Business:

33 MICHAEL DRIVE
CRAWFORDVILLE, FL 32327 US

New Principal Place of Business:

Current Mailing Address:

33 MICHAEL DRIVE
CRAWFORDVILLE, FL 32327 US

New Mailing Address:

FEI Number: 59-1316667 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MACKIN, MARGARET
33 MICHAEL DRIVE
CRAWFORDVILLE, FL 32327 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: D
Name: KING, BEULAH
Address: 111 SHAR-MEL-RE LANE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D
Name: MASSA, LARRY
Address: 256 MAGNOLIA RIDGE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: S
Name: BOLES, LINDA
Address: 215 MORIAH CREEK ROAD
City-St-Zip: ST. MARKS, FL 32355

Title: V
Name: PAYNE TURNER, SUSAN
Address: 141 HARVEY MILL ROAD
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: P
Name: MACKIN, MARGARET
Address: 116 WILDWOOD DR.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D
Name: TAYLOR, JAMES
Address: 70 ST JAMES STREET
City-St-Zip: PANACEA, FL 32346

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: MARGARET MACKIN P 03/14/2011

Electronic Signature of Signing Officer or Director Date