

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007 8:00 am
Secretary of State

04-20-2007 90199 003 ****70.00

DOCUMENT # 728112

1. Entity Name
**THE MUSKOGEE CREEK INDIAN NATION EAST OF THE
MISSISSIPPI, INC.**



Principal Place of Business
**1200 LYMAN HENDRY RD
PERRY, FL 32347 US**

Mailing Address
**1920 US 221 N
PERRY, FL 32347 US**

50001424



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04112007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HANSON, BETTY
1920 US 221 N
PERRY, FL 32347**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Betty Hanson
Signature, typed or printed name of registered agent and title if applicable.

Registered Agent
(NOTE: Registered Agent signature required when reinstating)

April 15, 07
DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME BLUE, SAM
STREET ADDRESS 4201 J.J. BLUE RD
CITY-ST-ZIP PERRY, FL 32347

TITLE VD ☐ Delete
NAME HANSON, MICHELLE
STREET ADDRESS 2686 WOODS CREEK RD
CITY-ST-ZIP PERRY, FL 32347

TITLE VD ☐ Delete
NAME ~~KANBY MARIA O~~
STREET ADDRESS 2105 WILLOW OAK RD
CITY-ST-ZIP ~~ORLANDO, FL 32860~~

TITLE TD ☐ Delete
NAME BARTALINI, JILL
STREET ADDRESS POB 662
CITY-ST-ZIP PERRY, FL 32347

TITLE SD ☐ Delete
NAME HANSON, TARA
STREET ADDRESS 2686 WOODS CREEK RD
CITY-ST-ZIP PERRY, FL 32347

TITLE SD ☒ Delete
NAME ALL, JUSTIN
STREET ADDRESS 522 BRYANT RUSSELL RD
CITY-ST-ZIP PERRY, FL 32348

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME *LANE, MARIE B*
STREET ADDRESS *2105 Willow Oak Rd*
CITY-ST-ZIP *Mulberry, Fla 33860*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME *BLAKE LANE*
STREET ADDRESS *2105 Willow Oak Rd*
CITY-ST-ZIP *Mulberry, Fla. 33860*

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:

Betty Hanson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Betty Hanson
Date

April 15, 07
Date

850-584-5273
Daytime Phone #