

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732741

FILED
May 20, 2009
Secretary of State

Entity Name: SUMTER COUNTY ECONOMIC DEVELOPMENT COUNCIL, INC.

Current Principal Place of Business:

408 E SEMINOLE AVE
BUSHNELL, FL 33513

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 337
BUSHNELL, FL 33513

New Mailing Address:

FEI Number: 59-2870873 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

THRASHER, RICHARD JR
408 E SEMINOLE AVE.
BUSHNELL, FL 33513 US

Name and Address of New Registered Agent:

WINCHESTER, LINDA J
408 E SEMINOLE AVE.
BUSHNELL, FL 33513 US

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: LINDA J. WINCHESTER

05/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WADE, JAMES III
Address: 116 BUSHNELL PLAZA
City-St-Zip: BUSHNELL, FL 33513

Title: P (X) Delete
Name: RICE, KELLY
Address: 1034 W HWY 48
City-St-Zip: BUSHNELL, FL 33513

Title: PP () Delete
Name: SIMPSON, JON
Address: POB 249
City-St-Zip: WILDWOOD, FL 34785

Title: S () Delete
Name: BRYANT, TRACY
Address: 100 LEM CARNES RD.
City-St-Zip: DAVENPORT, FL 33837

Title: T () Delete
Name: CRENSHAW, TERRY
Address: 11262 NORTH US 301
City-St-Zip: OXFORD, FL 34484

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES E. WADE, III

VP

05/20/2009

Electronic Signature of Signing Officer or Director

Date