

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733190

FILED
Jan 07, 2006
Secretary of State

Entity Name: CHARLIE CREEK COMMUNITY CO-OP, INC.

Current Principal Place of Business:

1120 MOCKINGBIRD RD
WAUCHULA, FL 33873

New Principal Place of Business:

1200 BLUE JAY
WAUCHULA, FL 33873

Current Mailing Address:

1120 MOCKINGBIRD RD
WAUCHULA, FL 33873

New Mailing Address:

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

Name and Address of Current Registered Agent:

EXENDINE, ROY
1120 MOCKINGBIRD RD
WAUCHULA, FL 33873 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: EXENDINE, ROY
Address: 1120 MOCKINGBIRD RD
City-St-Zip: WAUCHULA, FL 33873

Title: VP () Delete
Name: WILLIAMS, ELSIE
Address: 1040 MOCKINGBIRD RD
City-St-Zip: WAUCHULA, FL 33873

Title: S () Delete
Name: HUGHES, CHARLOTTE
Address: 1025 BLUE JAY
City-St-Zip: WAUCHULA, FL 33873

Title: T () Delete
Name: THOMPSON, ERMA
Address: 1230 MOCKINGBIRD RD
City-St-Zip: WAUCHULA, FL 33873

Title: D () Delete
Name: MILES, N H
Address: 1162 BLUE JAY
City-St-Zip: WAUCHULA, FL 33873

Title: D () Delete
Name: GILBERT, KENNETH
Address: 1060 MOCKINGBIRD RD
City-St-Zip: WAUCHULA, FL 33873

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: D (X) Change () Addition
Name: SHINDLER, HARRY
Address: 1260 BLUE JAY
City-St-Zip: WAUCHULA, FL 33873

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ROY EXENDINE

PRES

01/07/2006

Electronic Signature of Signing Officer or Director

Date