2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#758499

FILED Apr 08, 2009 Secretary of State

Entity Name: MUSCOGEE NATION OF FLORIDA, INC. **Current Principal Place of Business: New Principal Place of Business:** 278 CHURCH STREET 278 CHURCH ROAD BRUCE, FL 32455 BRUCE, FL 32455 US **Current Mailing Address: New Mailing Address:** 278 CHURCH STREET 278 CHURCH ROAD BRUCE, FL 32455 US BRUCE, FL 32455 US FEI Number: 59-2093051 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DENSON, ZERA 10503 STATE HIGHWAY 20 BRUCE, FL 32455 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WALTERS, ELLA MAE Name: Name: Address: 737 RIVA RIDGE Address: City-St-Zip: CRESTVIEW, FL 32536 City-St-Zip: Title: () Delete Title: () Change () Addition Name: DENSON, ZERA Name: Address: 10503 STATE HIGHWAY 20 Address: City-St-Zip: BRUCE, FL City-St-Zip: Title: CPD () Delete Title: () Change () Addition TUCKER, ANN D Name: Name: Address: 6 LAKESHORE DR Address: City-St-Zip: SHALIMAR, FL 32579 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: ZERA DENSON MRS 04/08/2009