

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 758499

**FILED**  
**Apr 15, 2010**  
**Secretary of State**

**Entity Name:** MUSCOGEE NATION OF FLORIDA, INC.

**Current Principal Place of Business:**

278 CHURCH ROAD  
BRUCE, FL 32455 US

**New Principal Place of Business:**

**Current Mailing Address:**

278 CHURCH ROAD  
BRUCE, FL 32455 US

**New Mailing Address:**

**FEI Number:** 59-2093051

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

DENSON, ZERA  
10503 STATE HIGHWAY 20  
BRUCE, FL 32455 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:** SD  
**Name:** WALTERS, ELLA MAE  
**Address:** 737 RIVA RIDGE  
**City-St-Zip:** CRESTVIEW, FL 32536 US

**Title:** TD  
**Name:** DENSON, ZERA  
**Address:** 10503 STATE HIGHWAY 20  
**City-St-Zip:** BRUCE, FL 32455 US

**Title:** CPD  
**Name:** TUCKER, ANN D  
**Address:** 10545 STATE HIGHWAY 20  
**City-St-Zip:** BRUCE, FL 32455 US

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:** MRS. ZERA DENSON

TREA

04/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date