2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2010
Secretary of State

DOCUMENT# 758673

Entity Name: FULL CIRCLE CO-OP, INC.

Current Principal Place of Business:

96 NW 6TH AVE
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

4563 BRADY BLVD.
DELRAY BCH, FL 334453244 US

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:

RAIMAN, MICHAEL
4563 BRADY BLVD.
DELRAY BEACH, FL 334453244 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: VD
Name: MARSHALL, STEVE
Address: 551 N MILITARY TRAIL
City-St-Zip: WEST PALM BCH, FL

Title: PD
Name: PILATO, MARIE
Address: 98 NW 6TH AVENUE
City-St-Zip: BOCA RATON, FL

Title: SD
Name: STREET, LORIANNE
Address: 254 NW 6TH AVE
City-St-Zip: BOCA RATON, FL

Title: D
Name: RAIMAN, MICHAEL
Address: 4563 BRADY BLVD.
City-St-Zip: DELRAY BCH, FL 334453244

Title: T
Name: OTTIMER, LYNN
Address: 4563 BRADY BLVD
City-St-Zip: DELRAY BEACH, FL 33445

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: MICHAEL RAIMAN D 02/16/2010

Electronic Signature of Signing Officer or Director — Date