

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760227

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: COMMUNITY COOPERATIVE PRESCHOOL, INC.

**Current Principal Place of Business:**

550 122ND STREET OCEAN  
MARATHON, FL 33050 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 500697  
MARATHON, FL 33050 US

**New Mailing Address:**

FEI Number: 59-2111579

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RODGERS, BARBARA  
550 122ND ST.  
MARATHON, FL 33050 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: PD ( ) Delete  
Name: RODGERS, BARBARA  
Address: #3 6TH STREET  
City-St-Zip: KEY COLONY BEACH, FL

Title: TD ( ) Delete  
Name: JORDAN, BRANDI  
Address: 714 83RD STREET  
City-St-Zip: MARATHON, FL 33050

Title: SD ( ) Delete  
Name: LOPEZ, ANGELA  
Address: 504 85TH STREET  
City-St-Zip: MARATHON, FL 33050

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: RODGERS, BARBARA  
Address: #3 6TH STREET  
City-St-Zip: KEY COLONY BEACH, FL

Title: T (X) Change ( ) Addition  
Name: JORDAN, BRANDI  
Address: 714 83RD STREET  
City-St-Zip: MARATHON, FL 33050

Title: S (X) Change ( ) Addition  
Name: LOPEZ, ANGELA  
Address: 504 85TH STREET  
City-St-Zip: MARATHON, FL 33050

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: BARBARA RODGERS

D

04/28/2008

Electronic Signature of Signing Officer or Director

Date