2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# 768992

Entity Name: HITCHING POST CO-OP, INC.

Current Principal Place of Business:

32 CHEYENNE TRAIL
NAPLES, FL 33962

New Principal Place of Business:

Current Mailing Address:

32 CHEYENNE TRAIL
NAPLES, FL 33962

New Mailing Address:

FEI Number: 59-2369192 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORDON, SCOTT
240 S. PINEAPPLE AVE.
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

GORDON, SCOTT
ONE SARASTA TOWER, TWO TAMIAMI TRAIL NORTH
500
SARASOTA, FL 34236 US

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: _____ 04/28/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	ESKRIDGE, RICHARD O	
Address:	2 NATCHEZ TRL	
City-St-Zip:	NAPLES, FL 34113	
Title:	AT	( ) Delete
Name:	GALLAGHER, KEVIN	
Address:	17 SPANISH TRAIL	
City-St-Zip:	NAPLES, FL 34113	
Title:	VP	( ) Delete
Name:	MUNGER, KENNETH	
Address:	2 OREGON TRL	
City-St-Zip:	NAPLES, FL 34113	
Title:	D	( ) Delete
Name:	MCKEEFRY, JIMMY L	
Address:	22 ABILENE TRAIL	
City-St-Zip:	NAPLES, FL 34113	
Title:	D	( ) Delete
Name:	MCINTYRE, GORDON	
Address:	2 OSAGE TRAIL	
City-St-Zip:	NAPLES, FL 34113	
Title:	S	( ) Delete
Name:	SLOSS, BETTY	
Address:	105 BAREFOOT WILLIAMS RD	
City-St-Zip:	NAPLES, FL	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	S	(X) Change ( ) Addition
Name:	ESKRIDGE, RICHARD O	
Address:	5 ARAPAHO TRAIL	
City-St-Zip:	NAPLES, FL 34113	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	PD	(X) Change ( ) Addition
Name:	MUNGER, KENNETH	
Address:	2 OREGON TRL	
City-St-Zip:	NAPLES, FL 34113	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	MCINTYRE, GORDON	
Address:	2 OSAGE TRAIL	
City-St-Zip:	NAPLES, FL 34113	
Title:	D	(X) Change ( ) Addition
Name:	LEESON, WILLIAM	
Address:	105 BAREFOOT WILLIAMS RD	
City-St-Zip:	NAPLES, FL	

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: KENNETH G. MUNGER PD 04/28/2008
Electronic Signature of Signing Officer or Director — Date