

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 07, 2012
Secretary of State

DOCUMENT# F10000001055

Entity Name: THE CHARGE KEEPERS, INC.**Current Principal Place of Business:**921 S.W.3RD ST
OCALA, FL 34474**New Principal Place of Business:****Current Mailing Address:**PO BOX 831723
OCALA, FL 34483**New Mailing Address:****FEI Number:** 63-1190308**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HOLT, EVELYNN
600 N.W.38TH AVE
OCALA, FL 34475 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: CP
Name: HOLT, EVELYNN DR.
Address: 600 N.W.38TH AVE
City-St-Zip: Ocala, FL 34475

Title: BM
Name: BATTLE, JUANITA
Address: 921 S.W. 3RD ST
City-St-Zip: Ocala, FL 34474

Title: BM/S
Name: MOSLEY, PATRICIA
Address: 3 PINE TRACE LN.
City-St-Zip: Ocala, FL 34472

Title: BM
Name: MOSLEY, THOMAS
Address: 5596 S.W. 88TH PL
City-St-Zip: Ocala, FL 34480

Title: BM
Name: DEMPSEY, DOROTHY
Address: 1337 NW 13TH AVE
City-St-Zip: Ocala, FL 34474

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: EVELYN HOLT

CP

09/07/2012

Electronic Signature of Signing Officer or Director

Date