2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F56782

FILED Apr 11, 2006 Secretary of State

Entity Name: CO-OPERATIVE ENTERPRISES, INC.

urrent P	Principal Plac	e of Business:	New Principal Pla	ce of Business:
	DEE ROAD , FL 33838	US		
current N	/lailing Addre	ess:	New Mailing Add	ress:
	DEE ROAD , FL 33838	US		
El Number	r: 59-2146161	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of	Current Registered Agent:	Name and Addres	s of New Registered Agent:
DAVIS, JA PO BOX 7 VINTER I		3883 US		
he above		submits this statement for th	e purpose of changing its regist	ered office or registered agent, or both,
	e of Florida.			
n the Stat	RE:	onic Signature of Registered A	Agent	Date
n the Stat SIGNATU	RE: Electro	onic Signature of Registered and Trust Fund Contribution ().	Agent	Date
n the Stat	RE: Electro	ng Trust Fund Contribution ().		Date NGES TO OFFICERS AND DIRECTOR
n the Stat	RE: Electro mpaign Financi S AND DIRE VP (DAVIS, JAYNI PO BOX 7644	ng Trust Fund Contribution (). CTORS:) Delete E B,		
n the Stat GNATU Jection Ca DFFICER Itle: ame: ddress:	RE: Electron	ng Trust Fund Contribution (). CTORS:) Delete E B, 4 EN, FL 33883) Delete RGE A,	ADDITIONS/CHAN Title: Name: Address:	NGES TO OFFICERS AND DIRECTOR
n the Stat IGNATU Iection Ca PFFICER ttle: ame: ddress: ity-St-Zip: ttle: ame: ddress:	RE: Electro	ng Trust Fund Contribution (). CTORS:) Delete E B, 4 EN, FL 33883) Delete RGE A, HOE CT EN, FL 33881) Delete E B,	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	NGES TO OFFICERS AND DIRECTOR () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAYNE B DAVIS VP 04/11/2006