2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State
05-04-2005 90106 044 ****61.25

DOCUMENT # N01000000251

1. Entity Name
SUWANNEE FELLOWSHIP, INC.

14016357

01192005 Chg-NP CR2E037 (10/03)

Principal Place of Business	Mailing Address
XXXXXXXXXXXXXX 114 NE FIRST STREET TRENTON, FL 32693	XXXXXXXXX PO BOX 908 TRENTON, FL 32693

2. Principal Place of Business	3. Mailing Address
60 SE 319th ST	PO Box 436 HWY 349
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Suwannee, Fl.	City & State: Suwannee, Fl.
Zip: 32692 Country: USA	Zip: 32692 Country: USA

4. FEI Number 59-3734983 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

XBURT THEODORE M
XXXXXXXXXXXXXXXX
X114 NE FIRST STREETXX
TRENTON, FL 32693
XXXXXXXXXXXXXXXX

7. Name and Address of New Registered Agent

Name: Charles Holland
Street Address (P.O. Box Number is Not Acceptable): 51 SE 236th St
PO Box 155
City: Suwannee FL Zip: 32692

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Charles Holland Charles E Holland 04-29-05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. DP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP HOLLAND, CHARLES PO BOX 155 SUWANNEE, FL 32692	☐ Delete	Holland, Charles 51 SE 236th ST Suwannee, Fl 32692	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT HOLLAND, DONNA PO BOX 155 SUWANNEE, FL 32692	☐ Delete	D Holland, Donna 51 SE 236th ST Suwannee, Fl 32692	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS WEEKS, VIDA F RT. 1 BOX 51 OLD TOWN, FL 32680	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RAGLAND, MICHAEL 106 PRINCETON RD. WARNER ROBINS, GA 91093	☒ Delete	DT Ed J. Billingham 201 SE Natalie Tarr. Lake City, Fl 32025	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, ELIZABETH (BETTY) P.O. BOX 280, HWY 349A SUWANNEE, FL 32692	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ed J. Billingham 4/29/2005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #