

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 28, 2006 08:00 AM
Secretary of State

DOCUMENT # N01000000251

1. Entity Name

SUWANNEE FELLOWSHIP, INC.



Principal Place of Business

60 SE 319TH STREET
SUWANNEE FL 32692

Mailing Address

PO BOX, HWY 349
SUWANNEE FL 32692



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3734983

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

2nd MOORE

CR2E037 (4/06)

6. Name and Address of Current Registered Agent

HOLLAND, CHARLES
51 SE 236 STREET
P.O. BOX 155
SUWANNEE FL 32692

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW: FEE IS \$61.25
Due By September 6, 2006

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

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DP
HOLLAND, CHARLES
51 SE 236 STREET
SUWANNEE FL 32692 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DT
HOLLAND, DONNA
51 SE 236 STREET
SUWANNEE FL 32692 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DS
WEEKS, VIDA F
RT. 1 BOX 51
OLD TOWN FL 32680 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DT
BILLINGHAM, ED J
201 SE NATALIE TERRACE
LAKE CITY FL 32025 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
MILLER, ELIZABETH (BETTY)
P.O. BOX 280, HWY 349A
SUWANNEE FL 32692 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ Change ☐ Addition
U000000572591
07/28/06-00005-005 61.25

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

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CITY-STATE-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Charles E. Holland* CHARLES E. HOLLAND 07-25-06 352-542-2595