2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2011
Secretary of State

DOCUMENT# N01139

Entity Name: BONFIRE COOPERATIVE ASSOCIATION, INC.

Current Principal Place of Business:

620 MISTI DR.
LEESBURG, FL 34788

New Principal Place of Business:

Current Mailing Address:

620 MISTI DR.
LEESBURG, FL 34788

New Mailing Address:

FEI Number: 59-2884245 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORDON, SCOTT
ONE SARASOTA TOWER
TWO NORTH TAMIAMI TRAIL SUITE # 500
SARASOTA, FL 342365575 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: PD
Name: FRICKER, ELEANOR
Address: 583 KELLI DRIVE
City-St-Zip: LEESBURG, FL 34788

Title: PD
Name: LASHUA, DAVID
Address: 631 MISTI DRIVE
City-St-Zip: LEESBURG, FL 34788

Title: D
Name: JOHNSTONE, PAT
Address: 781 LISA CIRCLE
City-St-Zip: LEESBURG, FL 34788

Title: TD
Name: BLAZER, SHIRLEY
Address: 575 TAMMI DRIVE
City-St-Zip: LEESBURG, FL 34788

Title: VD
Name: YORK, CATHIE
Address: 736 SHANNON AVE
City-St-Zip: LEESBURG, FL 34788

Title: SD
Name: KELLEY, RICHARD
Address: 522 TAMMI
City-St-Zip: LEESBURG, FL 34788

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: ELEANOR A. FRICKER DP 01/13/2011

Electronic Signature of Signing Officer or Director — Date