

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005396

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: SUMTER COUNTY MINING ASSOCIATION, INC.

**Current Principal Place of Business:**

616 KING'S HIGHWAY  
CENTER HILL, FL 33514

**New Principal Place of Business:**

**Current Mailing Address:**

616 KING'S HIGHWAY  
CENTER HILL, FL 33514

**New Mailing Address:**

FEI Number: 77-0662577

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRYANT, TRACY  
100 LEM CARNES RD.  
DAVENPORT, FL 33837 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: DP ( ) Delete  
Name: KIRKMYER, CLIFF  
Address: 1501 BELVEDERE RD.  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: DM ( ) Delete  
Name: HOUGHTON, BILL  
Address: P.O. BOX 1209  
City-St-Zip: ANTHONY, FL 32617

Title: DM ( ) Delete  
Name: COHRS, CARY  
Address: P.O. BOX 445  
City-St-Zip: SUMTERVILLE, FL 33585

Title: DP ( ) Delete  
Name: LANKER, DARRYL  
Address: 2441 E. FT. KING ST., STE. 202  
City-St-Zip: OCALA, FL 344712558

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: HOUGHTON, BILL  
Address: P.O. BOX 1209  
City-St-Zip: ANTHONY, FL 32617

Title: D (X) Change ( ) Addition  
Name: COHRS, CARY  
Address: P.O. BOX 445  
City-St-Zip: SUMTERVILLE, FL 33585

Title: D (X) Change ( ) Addition  
Name: LANKER, DARRYL  
Address: 2441 E. FT. KING ST., STE. 202  
City-St-Zip: OCALA, FL 344712558

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROGER W. SIMS, ESQ.

GC

04/26/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date