2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2009
Secretary of State

DOCUMENT# N06000010567

Entity Name: ALAPAHA RIVER BAND OF CHEROKEE INC.

Current Principal Place of Business:

3589 NW 28TH TERRACE
JENNINGS, FL 32053

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 226
JENNINGS, FL 32053

New Mailing Address:

FEI Number: 20-5166856 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NELSON, JOAN T
3589 NW 28TH TERRACE
JENNINGS, FL 32053 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: CEOD ( ) Delete
Name: NELSON, JOAN T
Address: 3589 NW 28TH TERRACE
City-St-Zip: JENNINGS, FL 320532008

Title: VPS ( ) Delete
Name: MOBLEY-HOINOSKI, MARY ELLEN
Address: 6722 52ND TERRACE
City-St-Zip: LIVE OAK, FL 320607507

Title: TD ( ) Delete
Name: HOINOSKI, ROGER
Address: 6722 52ND TERRACE
City-St-Zip: LIVE OAK, FL 320607507

Title: MD ( ) Delete
Name: BRANCH, ROBERT
Address: 5540 N.W. 7TH CT
City-St-Zip: PEMBROOK PINES, FL 33024

Title: MD ( ) Delete
Name: NELSON, RICHARD
Address: 3589 NW 28TH TERRACE
City-St-Zip: JENNINGS, FL 32053

Title: BOD (X) Delete
Name: PAYNE, MINNIE P
Address: 6002 NW 30TH TERRACE
City-St-Zip: JENNINGS, FL 32053

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: MGRD (X) Change ( ) Addition
Name: BRANCH, ROBERT
Address: 5540 N.W. 7TH CT
City-St-Zip: PEMBROOK PINES, FL 33024

Title: MGRD (X) Change ( ) Addition
Name: NELSON, RICHARD
Address: 3589 NW 28TH TERRACE
City-St-Zip: JENNINGS, FL 32053

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

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: JOAN THOMAS NELSON CEOD 07/01/2009

Electronic Signature of Signing Officer or Director — Date