

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010567

FILED
Jan 20, 2010
Secretary of State

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)

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:

NELSON, JOAN T CEOD
3589 NW 28TH TERRACE
JENNINGS, FL 32053 US

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: JOAN T NELSON

01/20/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: MGRD
Name: JONES, LORI M
Address: 3581 NW 28TH TERRACE
City-St-Zip: JENNINGS, FL 32053

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: JOAN T NELSON

CEOD

01/20/2010

Electronic Signature of Signing Officer or Director

Date