2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06968

FILED Sep 14, 2012 Secretary of State

Entity Name: MICANOPY AREA RECREATION CO-OPERATIVE, INC.

Current Principal Place of Business: New Principal Place of Business:

752 NE 7 TER 706 NE CHOLOKKA BLVD MICANOPY, FL 32667 US MICANOPY, FL 32667 U

Current Mailing Address: New Mailing Address:

P.O. BOX 203 P.O. BOX 137

MICANOPY, FL 32667 US MICANOPY, FL 32667 US

FEI Number: 59-2932010 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HARDFORD, MICHELLE
17106 NW 120TH AVENUE
REDDICK, FL 32686 US
HARDING STOPFORD, MICHELLE
17106 NW 120TH AVENUE RD
REDDICK, FL 32686 US
REDDICK, FL 32686 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: MICHELLE HARDING STOPFORD 09/14/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 JOHNSON, WILLIAM B III

 Address:
 16718 N HWY 329

 City-St-Zip:
 REDDICK, FL 32686

Title: VPD

 Name:
 SWITZER, KEVIN

 Address:
 11402 SW 10TH TERRACE

 City-St-Zip:
 MICANOPY, FL 32667

Title: SC

Name: HARDING STOPFORD, MICHELLE Address: 17106 NW 120TH AVENUE RD.

City-St-Zip: REDDICK, FL 32608

Title: TR

Name: HARDING STOPFORD, MICHELLE Address: 17106 NW 120TH AVENUE RD.

City-St-Zip: REDDICK, FL 32608

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: MICHELLE HARDING STOPFORD SC 09/14/2012