

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008504

FILED
Jul 19, 2009
Secretary of State

Entity Name: OKEECHOBEE WRANGLERS INC.

Current Principal Place of Business:

594 SW 86TH TERRACE
OKEECHOBEE, FL 34974

New Principal Place of Business:

Current Mailing Address:

594 SW 86TH TERRACE
OKEECHOBEE, FL 34974

New Mailing Address:

FEI Number: 26-0820188 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

Name and Address of New Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: QUESINBERRY, CHRIS
Address: 594 SW 86TH TERRACE
City-St-Zip: OKEECHOBEE, FL 34974

Title: S () Delete
Name: JOYNER, SONDA
Address: 594 SW 86TH TERRACE
City-St-Zip: OKEECHOBEE, FL 34974

Title: T () Delete
Name: QUESINBERRY, STEPHANIE
Address: 594 SW 86TH TERRACE
City-St-Zip: OKEECHOBEE, FL 34974

Title: VP () Delete
Name: JOYNER, GREG
Address: 594 SW 86TH TERR.
City-St-Zip: OKEECHOBEE, FL 34974

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: JOYNER, SONDA
Address: 594 SW 86TH TERRACE
City-St-Zip: OKEECHOBEE, FL 34974

Title: S (X) Change () Addition
Name: QUESINBERRY, STEPHANIE
Address: 594 SW 86TH TERRACE
City-St-Zip: OKEECHOBEE, FL 34974

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: CHRIS QUESINBERRY

P

07/19/2009

Electronic Signature of Signing Officer or Director

Date