

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006599

FILED  
Jan 26, 2009  
Secretary of State

Entity Name: FLORIDA MUDCUTTERS, INC.

**Current Principal Place of Business:**

1687 MCGREGOR RESERVE DRIVE  
FT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

1687 MCGREGOR RESERVE DRIVE  
FT MYERS, FL 33901

**New Mailing Address:**

FEI Number: 35-2343071

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KURASH, CONSTANCE  
1687 MCGREGOR RESERVE DRIVE  
FT MYERS, FL 33901 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: P ( ) Delete  
Name: KURASH, CONSTANCE  
Address: 1687 MCGREGOR RESERVE DRIVE  
City-St-Zip: FT MYERS, FL 33901

Title: VP ( ) Delete  
Name: MORRISON, CHARLENE  
Address: 8500 HENDERSON GRADE RD  
City-St-Zip: N FT MYERS, FL 33917

Title: S ( ) Delete  
Name: RIDGERS, KATRICIA  
Address: 6384 MORGAN LA LEE LANE  
City-St-Zip: FT MYERS, FL 33912

Title: T ( ) Delete  
Name: BURLEY, SUZANNE  
Address: 12846 DEVONSHIRE LAKES CIRCLE  
City-St-Zip: FT MYERS, FL 33913

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

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

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

Title: S (X) Change ( ) Addition  
Name: RODGERS, KATRICIA  
Address: 6384 MORGAN LA LEE LANE  
City-St-Zip: FT MYERS, FL 33912

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: CONSTANCE KURASH

P

01/26/2009

Electronic Signature of Signing Officer or Director

Date