

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000005322

FILED
Apr 30, 2012
Secretary of State

Entity Name: WAKULLA ONE, INC.

Current Principal Place of Business:

64 EMERALD ACRES ROAD
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

64 EMERALD ACRES ROAD
CRAWFORDVILLE, FL 32327

New Mailing Address:

POST OFFICE BOX 396
CRAWFORDVILLE, FL 32326

FEI Number: 45-2467172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARINEAU, CAROL
64 EMERALD ACRES ROAD
CRAWFORDVILLE, FL 32327 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
Name: LAMBOU, DENITA
Address: 233 BAY PINE DRIVE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: S
Name: SANDERS, MICHELLE
Address: 21 C. L. TOWNSEND LANE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: T
Name: BARINEAU, CAROL J
Address: 64 EMERALD ACRES ROAD
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D
Name: MEDINA, RAMON
Address: 26 LESLIE CIRCLE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D
Name: GASKIN, DAWN
Address: 1370 COASTAL HIGHWAY
City-St-Zip: PANACEA, FL 32346

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: CAROL J. BARINEAU

T

04/30/2012

Electronic Signature of Signing Officer or Director

Date