

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19646

FILED  
Feb 21, 2012  
Secretary of State

Entity Name: FLORIDA SKP CO-OP, INC.

**Current Principal Place of Business:**

2219 SKP WAY  
COMMUNITY BUILDING  
WAUCHULA, FL 338734870

**New Principal Place of Business:**

**Current Mailing Address:**

2219 SKP WAY  
COMMUNITY BUILDING  
WAUCHULA, FL 338734870

**New Mailing Address:**

FEI Number: 59-2790108

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GERARD & ASSOCIATES, PA  
2100 LAKEVIEW DRIVE  
SUITE 2  
SEBRING, FL 33870 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: LINDSTROM, WALTER  
Address: 2219 SKP WAY  
City-St-Zip: WAUCHULA, FL 33873

Title: T  
Name: ASLIN, DONNA  
Address: 2219 SKP WAY  
City-St-Zip: WAUCHULA, FL 33873

Title: S  
Name: MOUNTFORD, BILL  
Address: 2219 SKIP WAY  
City-St-Zip: WAUCHULA, FL 33873

Title: VP  
Name: MASELLA, DONALD  
Address: 2219 SKP WAY  
City-St-Zip: WAUCHULA, FL 338734870

Title: AT  
Name: FREEZE, JUDY  
Address: 2219 SKP WAY  
City-St-Zip: WAUCHULA, FL 33873

Title: AL  
Name: HOLLOWAY, SONDR  
Address: 2219 SKP WAY  
City-St-Zip: WAUCHULA, FL 33873

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: BILL MOUNTFORD

S

02/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date