2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20223

Entity Name: WAKULLA COUNTY RECREATION ASSOCIATION, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
C/O BEN WITHERS P.O. BOX 908 PANACEA, FL 32346 US	C/O BEN WITHERS PANACEA, FL 32346 US

Current Mailing Address:	**New Mailing Address:**
C/O BEN WITHERS P.O. BOX 908 PANACEA, FL 32346 US	

FEI Number: 59-3000431   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
WITHERS, BEN 886 COASTAL HWY. US 98 PANACEA, FL 34324 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS	ADDITIONS/CHANGES
Title: DP ( ) Delete Name: VAUSE, PHILIP Address: RT. 4 BOX 6782 City-St-Zip: CRAWFORDVILLE, FL 32327	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: DTDS ( ) Delete Name: WITHERS, BEN Address: P.O. BOX 908 City-St-Zip: PANACEA, FL 34324	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: DVP ( ) Delete Name: HEROLD, CARL Address: 45 FAIRWAY LANE City-St-Zip: CRAWFORDVILLE, FL 32327	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: BEN WITHERS   TREA   02/27/2009

      Electronic Signature of Signing Officer or Director   Date