

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34070

FILED
Apr 19, 2006
Secretary of State

Entity Name: FRANCHISEE COOPERATIVE ASSOCIATION, INC.

Current Principal Place of Business:

5581 COMMONWELTH AVE.
JACKSONVILLE, FL 32254

New Principal Place of Business:

5581 COMMONWEALTH AVE.
JACKSONVILLE, FL 32254

Current Mailing Address:

5581 COMMONWELTH AVE.
JACKSONVILLE, FL 32254

New Mailing Address:

5581 COMMONWEALTH AVE.
JACKSONVILLE, FL 32254

FEI Number: 59-2971153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLBROOK, H. LEON
2301 INDEPENDENT SQUARE
ONE INDEPENDENT DR
JACKSONVILLE, FL 32202 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: DS () Delete
Name: ULMER, MICKEY
Address: 642 E ST. RD 200
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: MILLER, JOHN
Address: 109 SUNSET POINT
City-St-Zip: PALATKA, FL 32177

Title: C () Delete
Name: TUBEL, ED
Address: 7421 CARMEL EXECUTIVE PARK #250
City-St-Zip: CHARLOTTE, NC 28226

Title: CHAI () Delete
Name: GARDNER, CURTIS
Address: 2103 SHORTER AVENUE
City-St-Zip: ROME, GA 30165

Title: D () Delete
Name: MCNAB, JIM
Address: PO BOX 1230
City-St-Zip: FLAGLER BEACH, FL 32136

Title: P () Delete
Name: COYNE, DALE
Address: 5980 WINKLER RD
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: CHAI (X) Change () Addition
Name: TUBEL, ED
Address: 7421 CARMEL EXECUTIVE PARK #250
City-St-Zip: CHARLOTTE, NC 28226

Title: D (X) Change () Addition
Name: GARDNER, CURTIS
Address: 2103 SHORTER AVENUE
City-St-Zip: ROME, GA 30165

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

Title: D (X) Change () Addition
Name: COYNE, DALE
Address: 5980 WINKLER RD
City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the 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: ED TUBEL

CHAI

04/19/2006

Electronic Signature of Signing Officer or Director

Date