

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34070

FILED
Feb 14, 2012
Secretary of State

Entity Name: FRANCHISEE COOPERATIVE ASSOCIATION, INC.

Current Principal Place of Business:

1305 ST JOHNS AVE
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

PO BOX 459
PALATKA, FL 32178

New Mailing Address:

FEI Number: 59-2971153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANTON, MARK P
1305 ST JOHNS AVE
PALATKA, FL 32177 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
Name: ULMER, MICKEY
Address: 642 E ST. RD 200
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D
Name: MCNAB, JAMES M JR
Address: 5185 S TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32952

Title: P
Name: TITEN, EDDIE
Address: 10409 GREENHEDGES DR
City-St-Zip: TAMPA, FL 33626

Title: D
Name: THOMAS, RICK
Address: 268 JOHNSON RD
City-St-Zip: BEREAS, KY 40403

Title: T
Name: STANTON, MARK P
Address: 1305 ST JOHNS AVE
City-St-Zip: PALATKA, FL 32177

Title: D
Name: COYNE, DALE
Address: 5980 WINKLER RD
City-St-Zip: FORT MYERS, FL 33919

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: MARK P STANTON

T

02/14/2012

Electronic Signature of Signing Officer or Director

Date