

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N48769

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** CALADIUM ARTS & CRAFTS COOPERATIVE, INC.

**Current Principal Place of Business:**

132 INTERLAKE BLVD  
LAKE PLACID, FL 33852

**New Principal Place of Business:**

**Current Mailing Address:**

132 E INTERLAKE BLVD  
LAKE PLACID, FL 33852

**New Mailing Address:**

**FEI Number:** 65-0339326

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLISS, MAGGIE  
149 CITRUS ROAD  
LAKE PLACID, FL 33852 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:** PT  
**Name:** BLISS, MAGGIE  
**Address:** 149 CITRUS ROAD  
**City-St-Zip:** LAKE PLACID, FL 33852

**Title:** ST  
**Name:** TAYLOR, PEGGY  
**Address:** 227 SIRENA DRIVE  
**City-St-Zip:** LAKE PLACID, FL 33852

**Title:** TT  
**Name:** YEAGER, MIKE  
**Address:** 9011 PLACID LAKES BLVD.  
**City-St-Zip:** LAKE PLACID, FL 33852

**Title:** VPD  
**Name:** MILLS, CAROL  
**Address:** 213 CATFISH ROAD  
**City-St-Zip:** LAKE PLACID, FL 33852

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 B. MILLS

VPD

02/17/2010

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

\_\_\_\_\_  
Date