

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004198

FILED
Feb 17, 2012
Secretary of State

Entity Name: F.P.S.A.A. JAMES A. COOK MEMORIAL FUND, INC.

Current Principal Place of Business:

ATTN: JUDITH MAXWELL
558 SW MAXWELL CT
FORT WHITE, FL 32038

New Principal Place of Business:

Current Mailing Address:

ATTN: JUDITH MAXWELL
558 SW MAXWELL CT
FORT WHITE, FL 32038

New Mailing Address:

FEI Number: 59-3305640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAXWELL, JUDITH
558 SW MAXWELL CT.
FT. WHITE, FL 32038 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: S
Name: MAXWELL, JUDITH A
Address: 558 SW. MAXWELL CT.
City-St-Zip: FORT WHITE, FL 32038

Title: VP
Name: ROCHE, JOHN
Address: 1843 SOUTH TAMiami TRAIL
City-St-Zip: OSPREY, FL 34229

Title: P
Name: LINLEY, TOM L
Address: 2015 CHOWKEEBIN NENE
City-St-Zip: TALLAHASSEE, FL 32301

Title: T
Name: OGDEN, KADIE
Address: 6470 SW 80TH AVENUE
City-St-Zip: TRENTON, FL 32693

Title: D
Name: APThORP, GEORGE
Address: 2888 SPRING CREEK HWY
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D
Name: COOK, SANDY
Address: 2888 SPRING CREEK HWY
City-St-Zip: CRAWFORDVILLE, FL 32327

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: JUDITH A. MAXWELL

S

02/17/2012

Electronic Signature of Signing Officer or Director

Date