

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005875

FILED
Feb 02, 2010
Secretary of State

Entity Name: THE TREASURES OF MADISON COUNTY, INC.

Current Principal Place of Business:

214 S RANGE ST
MADISON, FL 32340

New Principal Place of Business:

200 SW RANGE AVE
MADISON, FL 32340

Current Mailing Address:

PO BOX 541
MADISON, FL 32341

New Mailing Address:

FEI Number: 59-3353142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDEE, CARY A
901 SW PICKNEY STREET
MADISON, FL 32340 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: D
Name: HARDEE II, CARY A
Address: PO BOX 450
City-St-Zip: MADISON, FL 32341

Title: D
Name: THOMPSON, INA
Address: 409 NE HARRY AVE
City-St-Zip: MADISON, FL 32340

Title: D
Name: COPELAND, FRANCES
Address: P O BOX 154
City-St-Zip: MADISON, FL 32341

Title: T
Name: SCHNITKER, KAY
Address: 133 NE HARRY AVE
City-St-Zip: MADISON, FL 32340

Title: D
Name: BUNTING, WILLIAM
Address: LIVINGSTON SPRINGS ACRES
City-St-Zip: MADISON, FL 32340

Title: P
Name: MAIER, JANET
Address: 501 N RANGE ST
City-St-Zip: MADISON, FL 32340

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: KAY SCHNITKER

TRES

02/02/2010

Electronic Signature of Signing Officer or Director

Date