2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004674

FILED Apr 19, 2011 Secretary of State

Entity Name: NORMANDY VILLAGE UTILITY CO-OP, INC.

Current Principal Place of Business: New Principal Place of Business:

1702 LINDSEY RD JACKSONVILLE, FL 32221

Current Mailing Address: New Mailing Address:

1702 LINDSEY RD JACKSONVILLE, FL 32221

FEI Number: 59-3470858 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

LETIEN, DENISE L
6219 MAGELLAN RD.
6219 MAGELLAN RD.

JACKSONVILLE, FL 32222 US JACKSONVILLE, FL 32222 US

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: 04/19/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DVPT

 Name:
 STUDY, NORMAN D

 Address:
 4631 MAGILL ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32219

Title: D

 Name:
 LIVENGOOD, E.F

 Address:
 2139 PATOU DRIVEWEST

 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: D

Name: OAKLEY, AGNES R

Address: 7935 LIMOGES DRIVE SOUTH City-St-Zip: JACKSONVILLE, FL 32210

Title: DF

 Name:
 GMUCA, RAYMOND F

 Address:
 8209 BAZAINE DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: DSM

Name: LETIEN, DOROTHY E

Address: 8091 LOURDES DRIVE SOUTH City-St-Zip: JACKSONVILLE, FL 32210

Title:

 Name:
 LEVEROCK, R.E

 Address:
 2042 MONTEAU DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32210

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: DOROTHY E. LETIEN MDS 04/19/2011