

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005685

FILED  
Jan 25, 2009  
Secretary of State

Entity Name: MID FLORIDA BUCKSKIN ASSOCIATION, INC.

**Current Principal Place of Business:**

4200 RAYBURN RD.  
COCOA, FL 32926 US

**New Principal Place of Business:**

**New Mailing Address:**

4200 RAYBURN RD.  
COCOA, FL 32926 US

**Current Mailing Address:**

9651 NE 46 LANE  
BRONSON, FL 32621 US

FEI Number: 59-3397629

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEBORAH, PEMBERTON L  
9651 NE 46 LANE  
BRONSON, FL 32621 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: P ( ) Delete  
Name: MCGEE, LISA K  
Address: 4200 RAYBURN RD.  
City-St-Zip: COCOA, FL 32926 US

Title: VP ( ) Delete  
Name: HOUGHTON, LIZA  
Address: 365 DEER RUN  
City-St-Zip: OSTEEN, FL 32764 US

Title: S ( ) Delete  
Name: BISHOP-TERRELL, SHIRLEY A  
Address: 6791 W. HWY. 316  
City-St-Zip: REDDICK, FL 32686 US

Title: T ( ) Delete  
Name: PEMBERTON, DEBORAH L  
Address: 9651 NE 46 LANE  
City-St-Zip: BRONSON, FL 32621

Title: D ( ) Delete  
Name: CATE, CINDY  
Address: 6591 SE 143 CT.  
City-St-Zip: MORRISTON, FL 32668

Title: D ( ) Delete  
Name: KRUMMENACKER, LOREE  
Address: 39539 WINDWARD AVE.  
City-St-Zip: EUSTIS, FL 32736 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: CATE, CINDY  
Address: 6591 SE 143 CT.  
City-St-Zip: MORRISTON, FL 32668

Title: D (X) Change ( ) Addition  
Name: REBECCA, HURM  
Address: 3629 NE 159TH PL.  
City-St-Zip: GAINESVILLE, FL 32609

Title: D (X) Change ( ) Addition  
Name: WILLIAMS, CHIP  
Address: 1471 FRUIT COVE RD., N.  
City-St-Zip: JACKSONVILLE, FL 32259 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DEBORAH L. PEMBERTON

T

01/25/2009

Electronic Signature of Signing Officer or Director

Date