

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001450

FILED
Feb 16, 2010
Secretary of State

Entity Name: CENTRAL FLORIDA ELECTRIC COOPERATIVE EDUCATIONAL CHARITY, INC.

Current Principal Place of Business:

1124 NORTH YOUNG BLVD
CHIEFLAND, FL 32626

New Principal Place of Business:

Current Mailing Address:

1124 NORTH YOUNG BLVD
CHIEFLAND, FL 32626

New Mailing Address:

FEI Number: 59-3512777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEAUCHAMP, GREGORY V
107 E PARK AVE
CHIEFLAND, FL 32626 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
Name: CRAVEY, MATT
Address: P.O. BOX 1633 N/A
City-St-Zip: CROSS CITY, FL 32628

Title: T
Name: KING, CHARLIE
Address: P.O. BOX 363 N/A
City-St-Zip: CHIEFLAND, FL 32644

Title: V
Name: FAIRCLOTH, DAN JR
Address: P.O. BOX 1628 N/A
City-St-Zip: CHIEFLAND, FL 32644

Title: S
Name: MCINNIS, KATHRYN
Address: P.O. BOX 74 N/A
City-St-Zip: OLD TOWN, FL 32680

Title: D
Name: BEASLEY, ELI
Address: P.O. BOX 383 N/A
City-St-Zip: CHIEFLAND, FL 32644

Title: D
Name: JONES, JUSTIN
Address: P.O. BOX 688
City-St-Zip: NEWBERRY, FL 32669

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: JUSTIN D. JONES

MR.

02/16/2010

Electronic Signature of Signing Officer or Director

Date