

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003004

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** FRANCIS I COOPERATIVE ASSOCIATION, INC..

**Current Principal Place of Business:**

29 MIMI ST  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

29 MIMI ST  
SEBRING, FL 33870

**New Mailing Address:**

**FEI Number:** 65-0322462

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KORP, WILLIAM  
1 SARASOTA TOWER, 2 NORTH TAMIAMI TRAIL  
SUITE 500  
SARASOTA, FL 34236 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: WOOD, JOHN E  
Address: 437 SUNRISE BLVD  
City-St-Zip: SEBRING, FL 33870

Title: V  
Name: HOFFARTH, BERNARD  
Address: 327 TIGERTAIL ROAD  
City-St-Zip: SEBRING, FL 33870

Title: S  
Name: CORMIER, FRAN  
Address: 429 SUNRISE BLVD  
City-St-Zip: SEBRING, FL 33870

Title: T  
Name: ROBERTS, SUSAN  
Address: 602 SEBRING DR  
City-St-Zip: SEBRING, FL 33870

Title: D  
Name: SAUER, NORM  
Address: 333 TIGERTAIL ROAD  
City-St-Zip: SEBRING, FL 33870

Title: D  
Name: KELLER, PATRICIA  
Address: 551 ADDISON STREET  
City-St-Zip: SEBRING, FL 33870

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: JOHN E WOOD

P

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date