

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004180

FILED
May 07, 2009
Secretary of State

Entity Name: OKEECHOBEE COMMUNITY IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

275 S.W. 25TH ST.
OKEECHOBEE, FL 34974 US

New Principal Place of Business:

Current Mailing Address:

275 S.W. 25TH ST.
OKEECHOBEE, FL 34974 US

New Mailing Address:

FEI Number: 65-0890663 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROBERSON, GEORGE L
275 S.W. 25TH ST.
OKEECHOBEE, FL 34974 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 () Delete
Name: ROBERSON, GEORGE L
Address: 275 S.W. 25TH ST.
City-St-Zip: OKEECHOBEE, FL 34974

Title: DT () Delete
Name: KENTY, AMY
Address: 417 NE 13TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: D () Delete
Name: BOSWELL, BERTHA
Address: 1503 N.E. 5TH ST
City-St-Zip: OKEECHOBEE, FL 34972

Title: D () Delete
Name: FERRELL, ROSE B
Address: 1604 NE. 5TH ST.
City-St-Zip: OKEECHOBEE, FL 34972

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

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: GEORGE L. ROBERSON

DIRE

05/07/2009

Electronic Signature of Signing Officer or Director

Date