

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07854

**Entity Name:** COMMUNITY COOPERATIVE, INC.**Current Principal Place of Business:**3429 DR MARTIN L KING  
FORT MYERS, FL 33916**Current Mailing Address:**PO BOX 2143  
FORT MYERS, FL 33902**FEI Number:** 59-2602772**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GALLOWAY, TRACEY U  
1344 SHEFFIELD WAY  
FORT MYERS, FL 33919 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VC
Name	MILLER, CHARLOTTE
Address	1813 LEE STREET
City-State-Zip:	FORT MYERS FL 33901
Title	C
Name	BANASIAK, KEITH
Address	13110 RICKENBACKER PKWY
City-State-Zip:	FORT MYERS FL 33913
Title	CFO
Name	FRETWELL, BLAIR
Address	322 SW 21ST STREET
City-State-Zip:	CAPE CORAL FL 33991

Title	SECRETARY, TREASURER
Name	VANHORN, RYAN
Address	1210 WESTFIELD DRIVE
City-State-Zip:	FORT MYERS FL 33919
Title	CEO
Name	GALLOWAY, TRACEY U
Address	PO BOX 2143
City-State-Zip:	FORT MYERS FL 33902
Title	CDOO
Name	EDWARDS, STEFANIE
Address	3429 DR MARTIN L KING
City-State-Zip:	FORT MYERS FL 33916

*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: BLAIR FRETWELL****CFO****04/13/2021**

Electronic Signature of Signing Officer/Director Detail

Date