

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701047

FILED
Jan 14, 2009
Secretary of State

Entity Name: FLORIDA FERTILIZER AND AGRICHEMICAL ASSOCIATION, INC.

Current Principal Place of Business:

58 4TH STREET., NW
SUITE 200
WINTER HAVEN, FL 338814667 US

New Principal Place of Business:

58 4TH STREET, NW
SUITE 200
WINTER HAVEN, FL 338814667 US

Current Mailing Address:

P.O. BOX 9326
WINTER HAVEN, FL 338839326 US

New Mailing Address:

FEI Number: 59-0245380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARTNEY, MARY C
58 4TH STREET, NW
STE 200
WINTER HAVEN, FL 33881 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: BUNCH, JUSTIN
Address: P.O. BOX 467
City-St-Zip: MULBERRY, FL 33860

Title: D () Delete
Name: PFEIFFER, GAYLON
Address: 11806 MARBLEHEAD DRIVE
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: SUTTON, BRENT
Address: P.O. BOX 1407
City-St-Zip: LAKE ALFRED, FL 33850

Title: P () Delete
Name: HARTNEY, MARY C
Address: 58 4TH STREET, NW SUITE 200
City-St-Zip: WINTER HAVEN, FL 33881 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: () 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: MARY C. HARTNEY

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01/14/2009

Electronic Signature of Signing Officer or Director

Date