


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 24, 2007 8:00 am**  
**Secretary of State**

04-24-2007 90006 033 \*\*\*\*61.25

DOCUMENT # 730641			
1. Entity Name FLORIDA FARM BUREAU WOMEN'S FUND, INC.			
Principal Place of Business 5700 SOUTHWEST 34TH STREET GAINESVILLE, FL 32608		Mailing Address 5700 SOUTHWEST 34TH STREET GAINESVILLE, FL 32608	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 51-0182662		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BUTLER, SCOTTIE J. 5700 SOUTHWEST 34TH STREET GAINESVILLE FLORIDA, FL 32608		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD PEARLBERG, VIRGINIA 398 NE LAUREL OAK WAY LEE, FL 32059 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>See Attachment</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD GRANT, MARILYN 2850 NW 100TH ST. OCALA, FL 34475 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TAYLOR, MILDRED 4128 US 331 SOUTH DEFUNIAK SPRINGS, FL 32435 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POUCHER, BETTY 3966 72ND ST. LIVE OAK, FL 32060 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMSON, MICHELLE P.O. BOX 279 SYDNEY, FL 33587 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>[Signature]</i>		4/20/07 352/374-1504	
JOHN L. HOBLICK, PRESIDENT		Date Daytime Phone #	

# ATTACHMENT

40078842  
 TT 730641

## SUPPLEMENT

(Florida Farm Bureau Women's Fund, Inc.)

### 12. NAMES AND STREET ADDRESSES OF EACH 2007 DIRECTOR AND OFFICER

NAMES OF OFFICERS & DIRECTORS	TITLE	STREET ADDRESS	CITY/STATE
Paarlberg, Virginia	C/D	398 NE Laurel Oak Way	Lee, FL 32059
Williamson, Michelle	V CH/D	2340 Sidney Dover Road	Dover FL 33527
Taylor, Mildred	D	4128 US 331 South	DeFuniak Spgs FL 32435
Poucher, Betty	D	3966 72 <sup>nd</sup> Street	Live Oak FL 32060
Hofer, Kelli	D	1856 NE 40 <sup>th</sup> Street	Ocala FL 34479
Parrish, Norma Jean	D	6235 County Road 218	Jacksonville FL 32234
Crocker, Ila	D	3330 Sam Allen Oaks Circle	Plant City, FL
Phypers, Brittany	D	546 N. Lakeview Road	Lake Placid FL 33852
Schuller, Laurie	D	PO Box 457	Scottsmeer, FL 32775
Griffin, Cindy	D	5394 SW 61 <sup>st</sup> Avenue	Davie FL 33314