

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790719

FILED
Jan 07, 2008
Secretary of State

Entity Name: CLAY COUNTY FARM BUREAU LAA

Current Principal Place of Business:

3960 LAZY ACRE ROAD
MIDDLEBURG, FL 32068

New Principal Place of Business:

Current Mailing Address:

3960 LAZY ACRE ROAD
MIDDLEBURG, FL 32068

New Mailing Address:

FEI Number: 59-6177719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERT JOINER - AGENCY MANAGER FARM BUREAU
3960 LAZY ACRE ROAD
MIDDLEBURG, FL 32068 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: PD () Delete
Name: PADGETT, RANDOLPH
Address: 4441 WEEKS ROAD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: VPD () Delete
Name: GODBOLD, JESSE
Address: 205 PARK STREET
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: SD () Delete
Name: PARRISH, NORMA J
Address: 6235 COUNTY RD 218
City-St-Zip: JACKSONVILLE, FL 32234

Title: D () Delete
Name: HICKEY, EUGENE
Address: 6806 SHARON RD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D () Delete
Name: SPENCER, JESSE
Address: 3529 KINDLEWOOD DR
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: SPURLIN, GERALD
Address: 3199 SR-16 WEST
City-St-Zip: GREEN COVE SPRINGS, FL

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:

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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: RANDOLPH PADGETT

PRES

01/07/2008

Electronic Signature of Signing Officer or Director

Date