

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90283 044 ****70.00



DOCUMENT # 790738

1. Entity Name

JEFFERSON COUNTY FARM BUREAU, LAA.

Principal Place of Business
 105 W ANDERSON ST
 MONTICELLO FL 32344
 US

Mailing Address
 105 W. ANDERSON ST.
 MONTICELLO FL 32344
 US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE CR2E037 (10/05)

City & State

City & State

4. FEI Number

59-1010268

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MONROE, STEPHEN
 610 HALLELUJAH LANE
 MONTICELLO FL 32344

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution.

\$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 | D | <input type="checkbox"/> Delete |
| NAME | LEWIS, DOROTHY P. | |
| STREET ADDRESS | 4167 AUCILLA | |
| CITY - ST - ZIP | MONTICELLO FL 32344 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | MONROE, DANNY III | |
| STREET ADDRESS | 10685 WAUKEENAH HWY | |
| CITY - ST - ZIP | MONTICELLO FL 32344 | |
| TITLE | V | <input type="checkbox"/> Delete |
| NAME | EDWARDS, WALTER B JR | |
| STREET ADDRESS | PO BOX 8 | |
| CITY - ST - ZIP | LLOYD FL 32337 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | BIRD, BUCKINGHAM | |
| STREET ADDRESS | P.O. BOX 247 N/A | |
| CITY - ST - ZIP | MONTICELLO FL 32345 | |
| TITLE | P | <input type="checkbox"/> Delete |
| NAME | MONROE, STEPHEN | |
| STREET ADDRESS | 610 HALLELUJAH LANE | |
| CITY - ST - ZIP | MONTICELLO FL 32344 | |
| TITLE | ST | <input type="checkbox"/> Delete |
| NAME | DEMOTT, HERBERT | |
| STREET ADDRESS | 915 GOVERNMENT FARM RD. | |
| CITY - ST - ZIP | MONTICELLO FL 32344 | |

| | |
|-----------------|---|
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
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| CITY - ST - ZIP | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Dorothy P. Lewis*
 DOROTHY P. LEWIS

4/4/06 850-557-2213

ATTACHMENT

60027781
#790738

2006 NOT-FOR PROFIT CORPORATION
ANNUAL REPORT (AR)
JEFFERSON COUNTY FARM BUREAU, LAA
ADDITIONAL OFFICERS AND DIRECTORS

TITLE
NAME D
BISHOP, BENJAMIN D.
539 SEVEN BRIDGES
MONTICELLO, FL. 32344

TITLE
NAME D
BRINSON, EDWARD B.
2023 DILLS ROAD
MONTICELLO, FL. 32344

TITLE
NAME D
FINLAYSON, JOHN M.
25 FINCREST
GREENVILLE, FL. 32331

TITLE
NAME D
FINLAYSON, JOHN MAC JR.
63 FINCREST
GREENVILLE, FL. 32331

TITLE
NAME D
FULFORD, ERNEST
2798 FULFORD
MONTICELLO, FL. 32344

TITLE
NAME D
LEWIS, DAVID
4592 AUCILLA
MONTICELLO, FL. 32344

TITLE
NAME D
WARREN, HENRY
4058 BASSETT DAIRY RD.
MONTICELLO, FL. 32344