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FILED
May 13 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 734541 (6)

1. Corporation Name

FLORIDA FARM BUREAU SCHOLARSHIP FUND, INC.

Principal Place of Business

Mailing Address

**5700 SW 34TH ST
GAINESVILLE FL 32608**

**5700 SW 34TH ST
GAINESVILLE FL 32608-5372**



3. Date Incorporated or Qualified
12/08/1975

3a. Date of Last Report
03/18/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
59-1662473

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BUTLER, SCOTTIE J
5700 SW 34TH ST
GAINESVILLE FL**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when relating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	RD	<input type="checkbox"/> DELETE
NAME	LOOP, CARL B JR.	
STREET ADDRESS	5700 SW 34TH STREET	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	VM	<input type="checkbox"/> DELETE
NAME	JARRATT, ROBERT	
STREET ADDRESS	5700 SW 34TH STREET	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	WHEELER, STUART	
STREET ADDRESS	5700 SW 34TH STREET	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	FERENCE, EARL	
STREET ADDRESS	5700 SW 34TH STREET	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	BASS, JAMES C	
STREET ADDRESS	18205 HWY 98 N	
CITY-ST-ZIP	OKEECHOBEE FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	MCMULLIAN, L.E. J	
STREET ADDRESS	7130 GREEN ROAD	
CITY-ST-ZIP	SNEADS FL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	SEE ATTACHED SUPPLEMENT
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	
2.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CARL B. LOOP, JR.

APRIL 15, 1997

352/374-1504

Date

Daytime Phone 40011181

CR2E037 (9/96)

SUPPLEMENT

12. NAMES AND STREET ADDRESSES OF EACH 1997 DIRECTOR AND OFFICER

	NAMES OF OFFICERS & DIRECTORS	TITLE	STREET ADDRESS	CITY/STATE
1	Loop, Carl B., Jr.	P/D	5700 SW 34th Street	Gainesville, FL 32608
2	Bass, James C. "J.C."	V/D	16205 Hwy. 98, N.	Okeechobee, FL 34972
3	McMullian, L.E., Jr.	S/D	7130 Green Road	Sneads, FL 32460
4	Byrum, Myron	T/D	22416 Old Providence Rd	Alachua, FL 32615
5	Burter, Scottie J.	Asst.-ST	5700 SW 34th Street	Gainesville, FL 32608
6	Beardsley, David	D	106 Ridgewood Avenue	Clewiston, FL 33440
7	Bodiford, Cecil, Jr.	D	Rt. 2, Box 33	Altha, FL 32421
8	Dasher, Randall	D	5322 180 th Street	McAlpin, FL 32062
9	Dickinson, Mrs. Anne	D	105 South Scenic Highway	Frostproof, FL 33843
10	Fogarty, Jim	D	56 Connie Drive	Crawfordville, FL 32327
11	Gaskins, Shirley	D	RR 2 Box 2095	Starke, FL 32091
12	Hoblick, John	D	250 West Retha	DeLeon Spgs, FL 32130
13	Lawrence, Tom	D	3830 Marsh Rd	Del and FL 32224-9701
14	Lier, Peter	D	2 Michael Creek Dr.	Vero Beach, FL 32963
15	Martin, Roy S.	D	7851 Campbell Road	Sarasota, FL 34240
16	Partin, Charles	D	2967 Partin Settlement Rd.	Kissimmee, FL 32744
17	Paulbannus, Mrs. Bea	D	1950 W. Country Rd.	Eustis, FL 32726
18	Register, Darrel	D	Rt. 1, Box 839	Sanderson, FL 32087
19	Segal, Fred	D	289 SE 4th Avenue	Pompano Bch FL 33060
20	Smith, Kenneth W.	D	23421 Whitman Road	Brooksville FL 34601
21	Smith, Wayne D.	D	9700 Hastings Blvd.	Hastings, FL 32145
22	Tidwell, Marion	D	8093 Chumuckla Hwy.	Pace, FL 32571
23	Waring, Howell	D	Rt. 4, Box 1225	Madison, FL 32340
24	Wetherington, Ron	D	2015 S Wooden Rd.	Dover, FL 33527
25	Wilson, Roy	D	Rt. 3, Box 1-J	Trenton FL 32693
26	Yoder, Steve, Jr.	D	RR 2, Box 60-C	Altha, Florida 32421