2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701047

Entity Name: FLORIDA FERTILIZER AND AGRICHEMICAL ASSOCIATION,

INC.

Current Principal Place of Business:

605 E. MAIN STREET BARTOW, FL 33830

Current Mailing Address:

POST OFFICE BOX 587 BARTOW, FL 33831-0587

FEI Number: 59-0245380 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARTNEY, MARY C 605 E. MAIN STREET BARTOW, FL 33830 US

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

FILED Jan 12, 2018

Secretary of State

CC6902770781

Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR

Name BUNCH, JUSTIN Name PFEIFFER, GAYLON

Address P.O. BOX 467 Address 11806 MARBLEHEAD DRIVE

City-State-Zip: MULBERRY FL 33860 City-State-Zip: TAMPA FL 33626

Title **PRESIDENT** Title **DIRECTOR**

Name SUTTON, BRENT Name HARTNEY, MARY C

Address P.O. BOX 1407 Address P.O. BOX 587

City-State-Zip: BARTOW FL 33831-0587 City-State-Zip: LAKE ALFRED FL 33850

Title VC. Title DIRECTOR

Name BAXTER, JOHN Name BARRY, MIKE

Address 2405 N. 71ST STREET Address 1216 OLD HOPEWELL ROAD

City-State-Zip: **TAMPA FL 33619** City-State-Zip: **TAMPA FL 33619**

Title DIRECTOR Title **DIRECTOR** Name CONROY, JACK Name CARSON, DAVID Address 5051 VARTY ROAD Address P.O. BOX 486

WINTER HAVEN FL 33884 City-State-Zip: PLANT CITY FL 33564 City-State-Zip:

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I hereby 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 all other like empowered.

SIGNATURE: MARY C. HARTNEY **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

01/12/2018 Date

Officer/Director Detail Continued:

DIRECTOR Title Title **DIRECTOR** Name DAVIS, KEITH Name JIM, FAIRCLOTH

Address P.O. BOX 1087 Address 1533 VILLAGE CENTER DRIVE

Title

Address

#206

DIRECTOR

City-State-Zip: WAUCHULA FL 33873 City-State-Zip: LAKELAND FL 33803

Title **TREASURER**

Name LANFIER, CHARLES Name MORRIS, ROY 959 S. ANGELO LAKE ROAD Address

Address 2635 EWELL ROAD City-State-Zip: AVON PARK FL 33825 City-State-Zip: LAKELAND FL 33811

Title DIRECTOR Title **CHAIRMAN**

PATTERSON, BRIAN Name Name ROBERTS, MIKE Address 6801 ENERGY COURT, STE. 100

P.O. BOX 188 City-State-Zip: SARASOTA FL 34240 City-State-Zip: FROSTPROOF FL 33843

Title DIRECTOR Title **DIRECTOR** Name SHAW, KEITH Name VARN, LAT

Address P.O. BOX 357 Address 220 W. BRANDON BLVD., STE. 201

City-State-Zip: MAYO FL 32066 City-State-Zip: BRANDON FL 33511

DIRECTOR Title Title **DIRECTOR**

HODGES, JOSEPH Name Name HUDSON, MIKE

Address P.O. BOX 2076 4100 GLADES CUT-OFF ROAD Address

City-State-Zip: BELLE GLADE FL 33430 City-State-Zip: FT. PIERCE FL 34981