DOCUMENT# 701047
Entity Name: FLORIDA FERTILIZER AND AGRICHEMICAL ASSOCIATION, INC.
Current Principal Place of Business:

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

605 E. MAIN STREET BARTOW, FL 33830

Current Mailing Address:

POST OFFICE BOX 587 BARTOW, FL 33831-0587

FEI Number: 59-0245380

Name and Address of Current Registered Agent:

HARTNEY, MARY C 605 E. MAIN STREET BARTOW, FL 33830 US Certificate of Status Desired: No

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

Officer/Director Detail :

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	HARTNEY, MARY C	Name	BARRY, MIKE			
Address	P.O. BOX 587	Address	1216 OLD HOPEWELL ROAD			
City-State-Zip:	BARTOW FL 33831-0587	City-State-Zip:	TAMPA FL 33619			
Title	CHAIRMAN	Title	DIRECTOR			
Title Name	CHAIRMAN BAXTER, JOHN	Title Name	DIRECTOR CARSON, DAVID			
Name Address	BAXTER, JOHN	Name	CARSON, DAVID P.O. BOX 486			
Name Address	BAXTER, JOHN 2405 N. 71ST STREET	Name Address	CARSON, DAVID P.O. BOX 486			
Name Address City-State-Zip:	BAXTER, JOHN 2405 N. 71ST STREET TAMPA FL 33619	Name Address City-State-Zip:	CARSON, DAVID P.O. BOX 486 PLANT CITY FL 33564			
Name Address City-State-Zip: Title	BAXTER, JOHN 2405 N. 71ST STREET TAMPA FL 33619 DIRECTOR	Name Address City-State-Zip: Title	CARSON, DAVID P.O. BOX 486 PLANT CITY FL 33564 DIRECTOR			
Name Address City-State-Zip: Title Name Address	BAXTER, JOHN 2405 N. 71ST STREET TAMPA FL 33619 DIRECTOR DAVIS, KEITH	Name Address City-State-Zip: Title Name	CARSON, DAVID P.O. BOX 486 PLANT CITY FL 33564 DIRECTOR JIM, FAIRCLOTH 1533 VILLAGE CENTER DRIVE #206			

Continues on page 2

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	01/29/2021

Electronic Signature of Signing Officer/Director Detail

FILED Jan 29, 2021 Secretary of State 5440800480CC

Date

Date

Officer/Director Detail Continued :

Title	VC	Title	DIRECTOR
Name	LANFIER, CHARLES	Name	MORRIS, ROY
Address	959 S. ANGELO LAKE ROAD	Address	2635 EWELL ROAD
City-State-Zip:	AVON PARK FL 33825	City-State-Zip:	LAKELAND FL 33811
Title	TREASURER	Title	CHAIRMAN
Name	PATTERSON, BRIAN	Name	ROBERTS, MIKE
Address	6801 ENERGY COURT, STE. 100	Address	P.O. BOX 188
City-State-Zip:	SARASOTA FL 34240	City-State-Zip:	FROSTPROOF FL 33843
Title	DIRECTOR	Title	DIRECTOR
Name	SHAW, KEITH	Name	JOHNSON, ERIC
Address	P.O. BOX 357	Address	240 BIRCH LANE
City-State-Zip:	MAYO FL 32066	City-State-Zip:	LAKELAND FL 33813
Title	DIRECTOR	Title	DIRECTOR
Name	HUDSON, MIKE	Name	RHONDA, TRIMBLE
Address	4100 GLADES CUT-OFF ROAD	Address	2701 N. ROCKY POINT DRIVE, STE. 600
City-State-Zip:	FT. PIERCE FL 34981	City-State-Zip:	TAMPA FL 33607-