

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 726291

**FILED**  
**Jan 29, 2018**  
**Secretary of State**  
**CC7265106414**

**Entity Name:** FARM VIEW ESTATES ASSOCIATION, INC.

**Current Principal Place of Business:**

5046 RED FOX RUN  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

PO BOX 180733  
TALLAHASSEE, FL 32318 US

**FEI Number:** 82-2373954

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ROUSSEAU, BARBARA G  
5046 RED FOX RUN  
TALLAHASSEE, FL 32303 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:** BARBARA G. ROUSSEAU

01/29/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name ARMANTROUT, KIRT  
Address PO BOX 180733  
City-State-Zip: TALLAHASSEE FL 32318

Title VP  
Name COGGINS, JAMES  
Address PO BOX 180733  
City-State-Zip: TALLAHASSEE FL 32318

Title TREASURER  
Name ROUSSEAU, BARBARA G  
Address PO BOX 180733  
City-State-Zip: TALLAHASSEE FL 32318

Title PRESIDENT  
Name SADBERRY, R. DAN  
Address PO BOX 180733  
City-State-Zip: TALLAHASSEE FL 32318

*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:** BARBARA G. ROUSSEAU

**TREASURER**

01/29/2018

Electronic Signature of Signing Officer/Director Detail

Date