

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730641

Entity Name: FLORIDA FARM BUREAU WOMEN'S FUND, INC.**Current Principal Place of Business:**5700 SOUTHWEST 34TH STREET
GAINESVILLE, FL 32608**Current Mailing Address:**5700 SOUTHWEST 34TH STREET
GAINESVILLE, FL 32608**FEI Number:** 51-0182662**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRASWELL, STACI
5700 SOUTHWEST 34TH STREET
GAINESVILLE FLORIDA, FL 32608 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:** STACI BRASWELL

02/17/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VC
Name	CARTE, SARAH
Address	14227 171ST ROAD
City-State-Zip:	LIVE OAK FL 32060

Title	D
Name	CHRISTMAS, ANN
Address	1916 PALMVIEW RD
City-State-Zip:	COTTONDALE FL 32431

Title	D
Name	LAURIE, SCHULLER
Address	P.O. BOX 457
City-State-Zip:	SCOTTSMOOR FL 32775

Title	CD
Name	PAARLBERG, VIRGINIA
Address	398 NE LAUREL OAK WAY
City-State-Zip:	LEE FL 32059

Title	D
Name	FLOOD, CHERYL
Address	P.O. BOX 147030
City-State-Zip:	GAINESVILLE FL 32614

Title	D
Name	ANSELL, VALERIE
Address	1321 CRYSTAL SANDS DRIVE
City-State-Zip:	JACKSONVILLE FL 32218

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: SARAH CARTE

VICE CHAIR

02/17/2015

Electronic Signature of Signing Officer/Director Detail

Date