ereby 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
th; 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
ove, or on an attachment with all other like empowered.

SIGNATURE: JUDI WHITSON

l he oath

abo

Electronic Signature of Signing Officer/Director Detail

D

04/24/2014

Date

Entity Name: HILLSBOROUGH COUNTY AG-VENTURE, INC. Current Principal Place of Business:

100 S. MULRENNAN ROAD VALRICO, FL 33594

Current Mailing Address:

DOCUMENT# N0400005710

100 S. MULRENNAN ROAD VALRICO, FL 33594

FEI Number: 20-2719496

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

WHITSON, JUDI 100 S. MULRENNAN ROAD VALRICO, FL 33594 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:

Officer/Director Detail : Title Title D D Name BANKS, VINA J Name HUDSON, LYNANN Address P.O. BOX 11766 4800 HWY 301 N Address P.O. BOX 11766 4800 HIGHWAY 301 N City-State-Zip: TAMPA FL 33680 City-State-Zip: TAMPA FL 33680 Title D WHITSON, JUDI Name Address 100 S. MULRENNAN ROAD City-State-Zip: VALRICO FL 33594

Certificate of Status Desired: No

FILED Apr 24, 2014 Secretary of State CC3881651461

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Date