

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000009467

Entity Name: CLAY COUNTY FARM BUREAU, INC.

Current Principal Place of Business:

3960 LAZY ACRES RD.
MIDDLEBURG, FL 32068

Current Mailing Address:

3960 LAZY ACRES RD.
MIDDLEBURG, FL 32068

FEI Number: 59-6177719

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOINER, ROBERT
3960 LAZY ACRES RD.
MIDDLEBURG, FL 32068 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

Officer/Director Detail :

Title PD
Name HENDRY, GAYWARD
Address 577 BRANSCOMB RD.
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title VD
Name HICKEY, MATT
Address 6761 SHARRON RD.
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title STD
Name PARRISH, NORMA J
Address 6235 CR 218
City-State-Zip: BALDWIN FL 32234

Title D
Name FARLEY, JOSH
Address PO BOX 937
City-State-Zip: PENNY FARMS FL 32079

Title D
Name PADGETT, RANDOLPH
Address 4441 WEEKS RD.
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title D
Name MOSLEY, KELLY
Address 4495 WEEKS RD.
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name DAVIS, JOSEPH M
Address 3820 RON ROAD
City-State-Zip: GREEN COVE SPRINGS FL 32043-8558

Title DIRECTOR
Name WHITMAN, BILL
Address 866 WARNER ROAD
City-State-Zip: GREEN COVE SPRINGS FL 32043

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: GAYWARD HENDRY

PD

02/19/2014

Electronic Signature of Signing Officer/Director Detail

Date