

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000009467

Entity Name: CLAY COUNTY FARM BUREAU, INC.

Current Principal Place of Business:

2000 HENLEY ROAD
MIDDLEBURG, FL 32068

Current Mailing Address:

2000 HENLEY ROAD
MIDDLEBURG, FL 32068 US

FEI Number: 59-6177719

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLLINGSWORTH, CHAD
2000 HENLEY ROAD
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: CHAD HOLLINGSWORTH

02/20/2024

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 SECRETARY
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 TREASURER
Name PADGETT, RANDOLPH
Address 4441 WEEKS ROAD
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name MOSLEY, KELLY
Address 4495 WEEKS ROAD
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name DAVIS, JOSEPH M
Address 136 LATERRA LINKS CIRCLE
#101
City-State-Zip: ST AUGUSTINE FL 32092

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

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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 F HENDRY

PRESIDENT

02/20/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name STEWART , DAMIAN
Address 6109 BOBBY PADGETT ROAD
City-State-Zip: BALDWIN FL 32234

Title DIRECTOR
Name HICKEY, EUGENE
Address 6806 SHARON ROAD
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name MIDDLETON, CROSS
Address P. O. BOX 493
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name GOFF, THELTON
Address 4327 CLOVE STREET
City-State-Zip: MIDDLEBURG FL 32068

Title DIRECTOR
Name WALLAU, ANNIE SHELDON
Address 18134 NE 77TH LANE
City-State-Zip: HAWTHORNE FL 32640

Title DIRECTOR
Name RATHJEN, MICHAEL
Address 5895 INDIAN TRAIL
City-State-Zip: KEYSTONE HEIGHTS FL 32656