2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000009467

Entity Name: CLAY COUNTY FARM BUREAU, INC.

Name and Address of Current Registered Agent:

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

JOINER, ROBERT 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:

Electronic Signature of Registered Agent

Date

FILED Feb 01, 2023

Secretary of State

3433659809CC

Officer/Director Detail:

Title Title VD

HENDRY, GAYWARD HICKEY, MATT Name Name

577 BRANSCOMB RD. 6761 SHARRON RD. Address Address

City-State-Zip: GREEN COVE SPRINGS FL 32043 GREEN COVE SPRINGS FL 32043 City-State-Zip:

Title D Title **SECRETARY**

Name FARLEY, JOSH PARRISH, NORMA J Name Address PO BOX 937 Address 6235 CR 218

PENNY FARMS FL 32079 City-State-Zip: City-State-Zip: BALDWIN FL 32234

Title DIRECTOR Title **TREASURER**

Name MOSLEY, KELLY Name PADGETT, RANDOLPH Address 4495 WEEKS ROAD Address 4441 WEEKS ROAD

GREEN COVE SPRINGS FL 32043 City-State-Zip: GREEN COVE SPRINGS FL 32043 City-State-Zip:

Title DIRECTOR Title DIRECTOR Name WHITMAN, BILL DAVIS, JOSEPH M Name

866 WARNER ROAD Address 136 LATERRA LINKS CIRCLE Address

#101

City-State-Zip: GREEN COVE SPRINGS FL 32043 City-State-Zip: ST AUGUSTINE FL 32092

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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

02/01/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name STEWART , DAMIAN Name GOFF, THELTON

Address 6109 BOBBY PADGETT ROAD Address 4327 CLOVE STREET

City-State-Zip: BALDWIN FL 32234 City-State-Zip: MIDDLEBURG FL 32068

Title DIRECTOR Title DIRECTOR

Name HICKEY, EUGENE Name WALLAU, ANNIE SHELDON

Address 6806 SHARON ROAD Address 18134 NE 77TH LANE

City-State-Zip: GREEN COVE SPRINGS FL 32043 City-State-Zip: HAWTHORNE FL 32640

Title DIRECTOR Title DIRECTOR

Name MIDDLETON, CROSS Name RATHJEN, MICHAEL

Address P. O. BOX 493 Address 5895 INDIAN TRAIL

City-State-Zip: GREEN COVE SPRINGS FL 32043 City-State-Zip: KEYSTONE HEIGHTS FL 32656