

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000010255

**Entity Name:** BAKER COUNTY FARM BUREAU, INC.

**Current Principal Place of Business:**

539 SOUTH 6TH STREET  
MACCLENNY, FL 32063

**Current Mailing Address:**

539 SOUTH 6TH STREET  
MACCLENNY, FL 32063

**FEI Number:** 59-6177715

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LYONS JR, EMIL CLAYTON  
539 SOUTH 6TH STREET  
MACCLENNY, FL 32063 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:** EMIL C LYONS JR

03/22/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name REGISTER, DARRYL  
Address P.O. BOX 38  
City-State-Zip: GLEN ST. MARY FL 32040

Title DIRECTOR  
Name FISH, PAT  
Address P.O. BOX 1297  
City-State-Zip: MACCLENNY FL 32063

Title DIRECTOR  
Name ADAMS, THOMAS  
Address 539 SOUTH 6TH STREET  
City-State-Zip: MACCLENNY FL 32063

Title DIRECTOR  
Name NORMAN, ROBERT  
Address 8875 SHIRLEY RD  
City-State-Zip: GLEN ST MARY FL 32040

Title DIRECTOR  
Name LYONS, CLAY  
Address 539 SOUTH 6TH STREET  
City-State-Zip: MACCLENNY FL 32063

Title DIRECTOR  
Name MANN, JOHN  
Address 539 SOUTH 6TH STREET  
City-State-Zip: MACCLENNY FL 32063

Title DIRECTOR, VP  
Name MOORE, DOUG  
Address 13538 BRINCE WAY  
City-State-Zip: GLEN ST MARY FL 32040

Title SECRETARY, TREASURER  
Name MOBLEY, JAMES WESLEY  
Address 5255 MOBLEY'S TRAIL  
City-State-Zip: MACCLENNY FL 32063

**Continues on page 2**

*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:** EMIL C LYONS JR

PRESIDENT

03/22/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            PRESIDENT  
Name            LYONS, EMIL CLAYTON JR.  
Address        106 WEST BLVD  
City-State-Zip:  MACCLENNY FL 32063

Title            DIRECTOR  
Name            BENNETT, VICTOR  
Address        12647 FRED HARVEY RD  
City-State-Zip: SANDERSON FL 32087

Title            DIRECTOR  
Name            CENTER, JORDAN  
Address        9608 RIVERBEND RD  
City-State-Zip: GLEN ST MARY FL 32040

Title            DIRECTOR  
Name            GIBSON, AUSTIN T  
Address        6062 WELLS RD  
City-State-Zip:  MACCLENNY FL 32063