

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000004777

**Entity Name:** BRICKYARD FARMERS MARKET AND COMMUNITY EDUCATION, INC.

**FILED**  
**Feb 26, 2017**  
**Secretary of State**  
**CC0275159818**

**Current Principal Place of Business:**

2415 NORTH MONROE ST  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

2415 NORTH MONROE ST  
TALLAHASSEE, FL 32303 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

WIGGINS, WALTER D  
2415 NORTH MONROE ST  
TALLAHASSEE, FL 32303 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 P  
Name WIGGINS, WALTER D  
Address 822 FUNSTON SIGSBEE RD  
City-State-Zip: MOULTRIE GA 31768

Title VP  
Name KIMBLE, HARRIS  
Address 2727 TALLOKAS RD  
City-State-Zip: QUITMAN GA 31643

Title SEC  
Name SHERMAN, KELVIN  
Address 1089 SWAMP CREEK RD  
City-State-Zip: WHIGHAM GA 39897

*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: WALTER D. WIGGINS

PRESIDENT

02/26/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date