

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32521

Entity Name: FLORIDA CERTIFIED ORGANIC GROWERS & CONSUMERS, INC.**FILED**
Mar 07, 2022
Secretary of State
5714411365CC**Current Principal Place of Business:**5700 SW 34TH STREET
SUITE 349
GAINESVILLE, FL 32608**Current Mailing Address:**5700 SW 34TH STREET
SUITE 349
GAINESVILLE, FL 32608 US**FEI Number: 59-3006664****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BALASUBRAMANIAN, RAMKRISHNAN EXECUTIVE DIRECTOR
5700 SW 34TH STREET
SUITE 349
GAINESVILLE, FL 32608 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: RAMKRISHNAN BALASUBRAMANIAN****03/07/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PRESIDENT
Name BROCCOLI, MEGAN
Address 5700 SW 34TH STREET
SUITE 349
City-State-Zip: GAINESVILLE FL 32608**Title** EXECUTIVE DIRECTOR
Name BALASUBRAMANIAN, RAMKRISHNAN
Address 5700 SW 34TH STREET
SUITE 349
City-State-Zip: GAINESVILLE FL 32608**Title** VP
Name PETREY, LOGAN
Address 5700 SW 34TH STREET
SUITE 349
City-State-Zip: GAINESVILLE FL 32608**Title** TREASURER
Name HASKINS, JESSE
Address 5700 SW 34TH STREET
SUITE 349
City-State-Zip: GAINESVILLE FL 32608**Title** SECRETARY
Name PEMBERTON, TERESA
Address 5700 SW 34TH STREET
SUITE 349
City-State-Zip: GAINESVILLE FL 32608

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: RAMKRISHNAN BALASUBRAMANIAN**EXECUTIVE DIRECTOR****03/07/2022**

Electronic Signature of Signing Officer/Director Detail

Date