

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000061039

Entity Name: AGRICULTURE EDUCATION SERVICES AND TECHNOLOGY, INC.**FILED**
Apr 27, 2024
Secretary of State
7574098742CC**Current Principal Place of Business:**STACI SIMS
5700 SW 34TH STREET
GAINESVILLE, FL 32608**Current Mailing Address:**STACI SIMS
5700 SW 34TH STREET
GAINESVILLE, FL 32608 US**FEI Number:** 45-2824959**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SIMS, STACI
5700 SW 34TH STREET
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:** STACI SIMS

04/27/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title PRESIDENT
Name SMITH, JEB S
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608Title VP
Name JOHNSON, STEVE
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608Title SECRETARY
Name ARCHEY, CLAY
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608Title TREASURER
Name DOONER, MICHAEL
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608Title DIRECTOR
Name WARD, BRETT
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608Title DIRECTOR
Name PITTMAN, JEFF
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608Title DIRECTOR
Name DICKS, STEVEN
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608Title DIRECTOR
Name RITCH, GLENN
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608**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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STACI SIMS

COO

04/27/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BYRD, MARK A
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name COOK, ADAM
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name DAUM, DANIELLE
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name HUNTER, VICTORIA
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name GONZALES, MATT
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name MCCRONE, HENRY
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name SPINOSA, CHRISTIAN
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name WEST, DANIEL
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name SHADRICK, TYLER
Address 5700 SW 34TH ST
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name HAMRICK, JEFFERY
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name PADGET, RANDOLPH
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name HARRISON, KEN
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name SUTTON, JAMES
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name HARTMAN, REED
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name DUANE, PAT
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name SODDERS, MARK
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name WILSON, MARK
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title COO
Name SIMS, STACI
Address 5700 SW 34TH STREET
City-State-Zip: GAINESVILLE FL 32608