
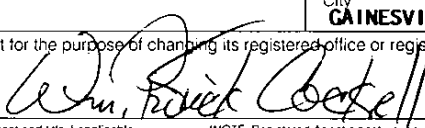
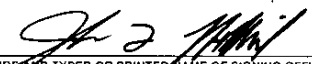


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 29, 2008 8:00 am**  
**Secretary of State**

04-29-2008 90077 024 \*\*\*150.00

<b>DOCUMENT # 275544</b> 1. Entity Name <b>FLORIDA FARM BUREAU ENTERPRISES, INC.</b>					
Principal Place of Business <del>% SCOTTIE J BUTLER</del> <b>WM. PAT COCKRELL</b> 5700 SW 34TH ST GAINESVILLE, FL 32608		Mailing Address <del>% SCOTTIE J BUTLER</del> <b>WM. PATRICK COCKRELL</b> 5700 SW 34TH ST GAINESVILLE, FL 32608			
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip		City & State  Zip		4. FEI Number <b>59-1091243</b> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required		04252008 Chg-P CR2E034 (12/06)			
6. Name and Address of Current Registered Agent  <b>BUTLER, SCOTTIE J</b> <b>5700 SW 34TH ST</b> <b>GAINESVILLE, FL</b>			7. Name and Address of New Registered Agent Name <b>WM. PATRICK COCKRELL, SR</b> Street Address (P.O. Box Number is Not Acceptable) <b>5700 SW 34TH STREET</b> City <b>GAINESVILLE</b> <b>FL</b> Zip Code <b>32608</b>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <b>WM. PATRICK COCKRELL</b> <small>Signature, typed or printed name of registered agent and title if applicable</small>		 <small>(NOTE: Registered Agent signature required when reinstating)</small>		<b>APRIL 28, 2008</b> <small>DATE</small>	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOBLOCK, JOHN L 5695 JOHNSON LAKE ROAD DE LEON SPRINGS, FL 32130	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROTH, RICK P.O. BOX 1300 BELLE GLADE, FL 33430	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BYRD, MARK A 8286 STONE ROAD APOPKA, FL 32703	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DOONER, MICHAEL 414 LIVE OAK DRIVE HAVANA, FL 323331223	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AST BUTLER, SCOTTIE J 5700 SW 34TH STREET GAINESVILLE, FL 32608	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRYAN, MYRON 22416 OLD PROVIDENCE ROAD ALACHUA, FL 32615	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DEAS, JON 5854 NW COUNTY RD 146 JENNINGS FL 32053	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AST WM. PATRICK COCKRELL 5700 SW 34TH STREET GAINESVILLE FL 32608	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRYAN, MYRON 22416 OLD PROVIDENCE ROAD ALACHUA, FL 32615	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <b>JOHN L. HOBLOCK, PRESIDENT</b>		<b>4/28/08</b> <b>352/374-1504</b> <small>Date Daytime Phone #</small>			

ATTACHMENT

40088327

# SUPPLEMENT

12. NAMES AND STREET ADDRESSES OF EACH 2008 DIRECTORS AND OFFICERS

TITLE	NAMES OF OFFICERS & DIRECTORS	STREET ADDRESS	CITY/STATE
D	Byrd, Mark	8286 Stone Road	Apopka, FL 32703
D	Dooner, Michael	414 Live Oak Drive	Havana FL 32333-1223
D	Dowdy, Dalton	11250 Bridges road	Jacksonville, FL 32218-1518
D	Johnson, Steve	3049 County Road 664	Bowling Green, FL 33834
D	Land, Rod	1801 NE Hewitt Land Road	Mayo, FL 32066
D	Lyons, Chris	1065 NW County Road 292	Mayo FL 32066
D	McAdams, George	2212 Washington Street	Lynn Haven, FL 32444
D	Marin, Rory S.	7851 Campbell Road	Sarasota, FL 34240
D	Pearlberg, Virginia	398 NE Laurel Oak Way	Lee, FL 32059
D	Peterson, Danny	125 E Indiana Avenue, Ste. B	DeLand FL 32724
D	Pittman, Jeff	6429 Lovedale Road	Bascom, FL 32423-9325
D	Schirard, Brant	1860 Pulitzer Road	Ft. Pierce FL 34945
D - DELETE	Shiver, Keith		
D	Smith, Kenneth W.	12040 Smith Dairy Road	Brooksville, FL 34601
D - ADDITION	Sodders, Mark	505 Greenway Drive	North Palm Bch FL 33408
D	Tidwell, Marion	8093 Chumuckla Hwy.	Pace, FL 32571
D	Vermilion, Jeff	2951 East Hwy. 318	Citra FL 32113
D	Wetherington, Ron	2015 S Wooten Rd.	Dover, FL 33527
D	Williamson, Michelle	2340 Sidney Dover Road	Dover FL 33527
D	Wilson, Mark	28300 Sw 177 <sup>th</sup> Ave.	Homestead, FL 33030
D	Wilson, Roy	9539 SE County Road 319	Trenton FL 32693
D ADDITION	Yee, Roland	12410 SW Keating	Port St. Lucie FL 34987