2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 30, 2007 8:00 am
Secretary of State
01-30-2007 90013 002 ****61.25

DOCUMENT # 703322

1. Entity Name

FLORIDA FEED ASSOCIATION, INCORPORATED

Principal Place of Business	Mailing Address
401 S PEBBLE BEACH BLVD SUN CITY CENTER FL 33573 US	PO BOX 5102 SUN CITY CENTER FL 33571 US

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7009312 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JACKSON, JAMES D. 401 S PEEBLE BEACH BLVD SUN CITY CENTER FL 33573	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	ES JACKSON, JAMES D. 401 S. PEBBLE BEACH BLVD. SUN CITY CENTER FL 73573	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D SYFRETT, CHUCK 501 SW 28TH TERRACE OKEECHOBEE FL 34974	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VP FURST, STEVE 3680 EMERALD LANE MULBERRY FL 33860	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VP MIKE BARBER 1422 COLLEGE ROAD BAINBRIDGE, GA 39819 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	P MARK, LARRY 12401 NW 77TH STREET OCALA FL 34482	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	P. FURST STEVE 3680 EMERALD LANE MULBERRY, FL 33860 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	S HARDING, JIM 4920 HIDDEN OAKS TRAIL SARASOTA FL 34232	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D JACKSON, LEE 1396 JEFFERSON DRIVE LAKELAND FL 33803	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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: JAMES D. JACKSON James D Jackson 1-24-07 813-637-6944
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #