



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90028 031 ****70.00

DOCUMENT # 717388 1. Entity Name HARDEE COUNTY FAIR INCORPORATED					
Principal Place of Business 617 RODEO DRIVE WAUCHULA, FL 33873			Mailing Address ALTMAN ROAD P O BOX 1236 WAUCHULA, FL 33873		
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 59-2029480	
Country		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CLARK, JAY A PRES 117 ILLINOIS AVE WAUCHULA, FL 33873				7. Name and Address of New Registered Agent Name Joseph B. Cherry Street Address (P.O. Box Number is Not Acceptable) 451 River Lane City Wauchula FL Zip Code 33873	
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 <u><i>Joseph B. Cherry</i></u> DATE <u>1/22/08</u> <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	D WILKINS, M E DIR P O BOX 966 WAUCHULA, FL 33873	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Terry Atchley 1035 Krollwood Circle Wauchula, FL 33873	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WANDA, ROBERTS 705 DOC COIL RD BOWLING GREEN, FL 33834	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P John G. Gordon 2131 St. Rd 62 Bowling Green FL 33834	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CONERLY, DOROTHY A LOUISIANA STREET WAUCHULA, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Teresa Crawford 342 Altman Rd Wauchula, FL 33873	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RICH, SAM H PO BOX 966 WAUCHULA, FL 33873	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Earl Ray Bill 620 Saunders St. Wauchula, FL 33873	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GILL, RAY POLK STREET WAUCHULA, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JAY A Clark 117 ILLINOIS AVE Wauchula, FL 33873	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHERRY, BARNEY PO BOX 1346 WAUCHULA, FL 33873	<input checked="" type="checkbox"/> Delete			
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 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: <u><i>Joseph B. Cherry</i></u> DATE <u>1/22/08</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT ATTACHMENT

DOCUMENT # 717388 1. Entity Name HARDEE COUNTY FAIR INCORPORATED					
Principal Place of Business 617 RODEO DRIVE WAUCHULA, FL 33873			Mailing Address ALTMAN ROAD P O BOX 1236 WAUCHULA, FL 33873		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		40013094	
City & State		City & State		01202008 Chg-NP CR2E037 (12/06)	
Zip Country		Zip Country		4. FEI Number 59-2029480	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CLARK, JAY A PRES 117 ILLINOIS AVE WAUCHULA, FL 33873			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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.			FL Zip Code		
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	D WILKINS, M E DIR P O BOX 966 WAUCHULA, FL 33873	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Debbie Gulliver P.O. Box 966 Wauchula, FL 33873	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WANDA, ROBERTS 705 DOC COIL RD BOWLING GREEN, FL 33834	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Richard Roe 2685 George Anderson Rd Wauchula, FL 33873	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CONERLY, DOROTHY A LOUISIANA STREET WAUCHULA, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jason Clark 479 Sumner Rd Wauchula, FL 33873	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RICH, SAM H PO BOX 966 WAUCHULA, FL 33873	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Monica Reas P.O. Box 2212 Wauchula, FL 33873	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GILL, RAY POLK STREET WAUCHULA, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Vincent Crawford 342 Altman Rd Wauchula, FL 33873	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHERRY, BARNEY PO BOX 1346 WAUCHULA, FL 33873	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Monica Stagg P.O. Box 954 Wauchula, FL 33873	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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SIGNATURE: _____					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Daytime Phone #					

HARDEE COUNTY FAIR INCORPORATED

ATTACHMENT

Principal Place of Business
617 RODEO DRIVE
WAUCHULA, FL 33873

Mailing Address
ALTMAN ROAD
P O BOX 1236
WAUCHULA, FL 33873

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

717388

40013094

01202008 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2029480 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

CLARK, JAY A PRES
117 ILLINOIS AVE
WAUCHULA, FL 33873

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

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

TITLE	D	WILKINS, M E DIR	<input type="checkbox"/> Delete
NAME		P O BOX 966	
STREET ADDRESS		WAUCHULA, FL 33873	
CITY - ST - ZIP			
TITLE	D	WANDA, ROBERTS	<input type="checkbox"/> Delete
NAME		705 DOC COIL RD	
STREET ADDRESS		BOWLING GREEN, FL 33834	
CITY - ST - ZIP			
TITLE	S	CONERLY, DOROTHY A	<input type="checkbox"/> Delete
NAME		LOUISIANA STREET	
STREET ADDRESS		WAUCHULA, FL	
CITY - ST - ZIP			
TITLE	T	RICH, SAM H	<input type="checkbox"/> Delete
NAME		PO BOX 966	
STREET ADDRESS		WAUCHULA, FL 33873	
CITY - ST - ZIP			
TITLE	D	GILL, RAY	<input type="checkbox"/> Delete
NAME		POLK STREET	
STREET ADDRESS		WAUCHULA, FL	
CITY - ST - ZIP			
TITLE	VP	CHERRY, BARNEY	<input type="checkbox"/> Delete
NAME		PO BOX 1346	
STREET ADDRESS		WAUCHULA, FL 33873	
CITY - ST - ZIP			

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	Matthew Crews	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		719 Popash Rd	
STREET ADDRESS		Wauchula, FL 33873	
CITY - ST - ZIP			
TITLE	D	Lockie Cary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		507 Civic Center Dr.	
STREET ADDRESS		Wauchula FL 33873	
CITY - ST - ZIP			
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY - ST - ZIP			

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #