## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#719890**

FILED Mar 31, 2009 Secretary of State

Entity Name: AGRICULTURE INSTITUTE OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

2429 LEGACY LAKE DRIVE 1715 HWY 17 SOUTH MAITLAND, FL 32751 US BARTOW, FL 33830 US

Current Mailing Address: New Mailing Address:

PO BOX 940625

MAITLAND, FL 32794 US

FEI Number: 59-1381461 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HEMPHILL, ROD
5700 SW 34TH STREET
GAINESVILLE, FL 32608 US
NEDLEY, HEATHER
1715 HWY 17 SOUTH
BARTOW, FL 33830 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: HEATHER NEDLEY 03/31/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PP ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 PACE, CASEY
 Name:
 NEDLEY, HEATHER

 Address:
 212 KENWITH RD
 4ddress:
 1715 HWY 17 SOUTH

 City-St-Zip:
 LAKELAND, FL 33803
 City-St-Zip:
 BARTOW, FL 33830

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: NEDLEY, HEATHER Name: MCGILL, BETSY

 Address:
 1715 HIGHWAY 17 SOUTH
 Address:
 PO BOX 217

 City-St-Zip:
 BARTOW, FL 33830
 City-St-Zip:
 LABELLE, FL 33975

Title: SV ( ) Delete Title: SVP (X) Change ( ) Addition

Name: WALLIN, SCOTT Name: WALLIN, SCOTT
Address: 166 LOOKOUT PLACE, SUITE 166
Address: 166 LOOKOUT PLACE, SUITE 166

 Address:
 166 LOOKOUT PLACE, SUITE 166
 Address:
 166 LOOKOUT PLACE, SUITE 166

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:
 MAITLAND, FL 32751

Title: S ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 NELIS, JENNIFER

 Address:
 1523 PARK CENTER DRIVE

Address:

NELIS, JENNIFER

Address:
1523 PARK CENTER DRIVE

Address: 1523 PARK CENTER DRIVE Address: 1523 PARK CENTER DRIVE
City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32835

Title: 1V ( ) Delete Title: S (X) Change ( ) Addition Name: MCGILL, BETSY Name: RICHARDSON, KATHY

 Name:
 MCGILL, BETSY
 Name:
 RICHARDSON, KATHY

 Address:
 PO BOX 217
 Address:
 PO BOX 147030

 City-St-Zip:
 LABELLE, FL 33975
 City-St-Zip:
 GAINESVILLE, FL 32614

Title: TD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 HEMPHILL, ROD
 Name:

 Address:
 PO BOX 147030
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32614
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: HEATHER B. NEDLEY, TREASURER MRS. 03/31/2009

Electronic Signature of Signing Officer or Director

Date