2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 08:00 A
Secretary of State

DOCUMENT # 741475

1. Entity Name
FLORIDA AGRICULTURAL COUNCIL, INC.

Principal Place of Business	Mailing Address
312 N. BUENA VISTA DR. LAKE ALFRED, FL 33850 US	PO BOX 1407 LAKE ALFRED, FL 33850 US

01042008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1883884
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BRENT, SUTTON
312 N. BUENA VISTA DR
LAKE ALFRED, FL 33850

DO NOT WRITE IN THIS SPACE

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 Brent Sutton Secretary — Jan. 4, 2008
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

10. OFFICERS AND DIRECTORS

TITLE	PP
NAME	BOLUSKY, BEN
STREET ADDRESS	1533 PARK CENTER DRIVE
CITY-ST-ZIP	ORLANDO, FL 328355705
TITLE	DST
NAME	SUTTON, BRENT
STREET ADDRESS	P.O. BOX 1407
CITY-ST-ZIP	LAKE ALFRED, FL 33850
TITLE	D
NAME	AERTS, MIKE
STREET ADDRESS	P O BOX 948153
CITY-ST-ZIP	MAITLAND, FL 32794
TITLE	P
NAME	ROBERSON, ROBBIE
STREET ADDRESS	P O BOX 1137
CITY-ST-ZIP	APOPKA, FL 32703
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000774422
01/07/08-80014-005 61.25

DO NOT WRITE IN THIS SPACE

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: Brent Sutton Secretary — 1/4/08 — 863-956-1101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #