

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741475

FILED
Mar 09, 2009
Secretary of State

Entity Name: FLORIDA AGRICULTURAL COUNCIL, INC.

Current Principal Place of Business:

312 N. BUENA VISTA DR.
LAKE ALFRED, FL 33850 US

New Principal Place of Business:

312 N. BUENA VISTA DR.
LAKE ALFRED, FL 33523 US

Current Mailing Address:

PO BOX 1407
LAKE ALFRED, FL 33850 US

New Mailing Address:

14632 MT. ZION ROAD
DADE CITY, FL 33523 US

FEI Number: 59-1883884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

BRENT, SUTTON
14632 MT. ZION ROAD
DADE CITY, FL 33523 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:

03/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PP () Delete
Name: BOLUSKY, BEN
Address: 1533 PARK CENTER DRIVE
City-St-Zip: ORLANDO, FL 328355705

Title: DST () Delete
Name: SUTTON, BRENT
Address: P.O. BOX 1407
City-St-Zip: LAKE ALFRED, FL 33850

Title: D () Delete
Name: AERTS, MIKE
Address: P O BOX 948153
City-St-Zip: MAITLAND, FL 32794

Title: P () Delete
Name: ROBERSON, ROBBIE
Address: P O BOX 1137
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BOLUSKY, BEN
Address: 1533 PARK CENTER DRIVE
City-St-Zip: ORLANDO, FL 32835

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: BRANCH, MIKE
Address: P O BOX 457
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: PP (X) Change () Addition
Name: ROBERSON, ROBBIE
Address: P O BOX 1137
City-St-Zip: APOPKA, FL 32768

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: BRENT W. SUTTON

SECR

03/09/2009

Electronic Signature of Signing Officer or Director

Date