

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744853

FILED
Jul 28, 2009
Secretary of State

Entity Name: BRADFORD COUNTY 4-H FOUNDATION, INC.

Current Principal Place of Business:

2266 N. TEMPLE AVE.
STARKE, FL 32091

New Principal Place of Business:

Current Mailing Address:

2266 N. TEMPLE AVE.
STARKE, FL 32091

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NISTLER, DEBBIE
2266 TEMPLE AVE
STARKE, FL 32091 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WHITHEAD, PAMELA
Address: 23754 NW CR 235
City-St-Zip: LAKE BUTLER, FL 32054

Title: VP () Delete
Name: ROSIER, ROXANNE
Address: 6608 NE CR 125
City-St-Zip: LAWTEY, FL 32058

Title: S () Delete
Name: BREWER, JODIE
Address: 12234 NW 198TH STREET
City-St-Zip: LAKE BUTLER, FL 32054

Title: TD () Delete
Name: PAUL, KIMBERLY
Address: 19964 NW CR 235
City-St-Zip: LAKE BUTLER, FL 32054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TD (X) Change () Addition
Name: GRIFFIS, KIMBERLY
Address: 19964 NW CR 235
City-St-Zip: LAKE BUTLER, FL 32054

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: KIMBERLY A. GRIFFIS

TD

07/28/2009

Electronic Signature of Signing Officer or Director

Date