2008 NOT-FOR-PROFIT CORPORATION

Secretary of State ANNUAL REPORT 02-04-2008 90027 003 ****61.25 **DOCUMENT #755660** HARDEE COUNTY 4-H CLUB FOUNDATION, INC. 40016212 Principal Place of Business Mailing Address HARDEE COUNTY EXTENSION SERVICE OFFICE HARDEE COUNTY EXTENSION SERVICE OFFICE **507 CIVIC CENTER DRIVE 507 CIVIC CENTER DRIVE** WAUCHULA, FL 33873 WAUCHULA, FL 33873 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02012008 CR2E037 (12/06) Chq-NP Applied For City & State City & State 4. FEI Number 59-3632384 Not Applicable Country Zio Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WYATT, CAROLYN 507 CIVIC CENTER DRIVE Street Address (P.O. Box Number is Not Acceptable) WAUCHULA, FL 33873 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 Carolyn H. Wyatt February 1, 2008 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD X Delete TITLE Change ☐ Addition TITLE Weeks, Danny 329 Riverside Drive CREWS, DENNIS NAME NAME STREET ADDRESS STREET ADDRESS 121 PRESCOTT ROAD CITY-ST-ZIP Wauchula, Fl 33873 WAUCHULA, FL 33873 CITY-ST-ZIP VD VD X Delete TITLE K Change ☐ Addition TITLE WEEKS, DANNY NAME Crews, Dennis NAME STREET ADDRESS 329 RIVERSIDE DRIVE STREET ADDRESS 121 Prescott Road CITY-ST-ZIP WAUCHULA, FL 33873 CITY - ST - ZIP Wauchula, Fl 33873 SD TITLE ☐ Change ☐ Addition ☐ Delete TITLE COOPER, RILLA NAME STREET ADDRESS STREET ADDRESS 3645 HENDRY ROAD CITY-ST-ZIP BOWLING GREEN, FL 33834 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TD WYATT, CAROLYN H NAME 507 CIVIC CENTER DRIVE STREET ADDRESS STREET ADORESS CITY - ST- ZIP WAUCHULA, FL 33873 CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED Feb 04, 2008 8:00 am

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. Carolyn H. Wyatt February 1, 2008 SIGNATURE: SIGNING OFFICER OR DIRECTOR