

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 771342

FILED  
Jun 09, 2003  
Secretary of State

Entity Name: ALACHUA COUNTY FARM BUREAU, LAA

## Current Principal Place of Business:

14435 NW US HWY 41  
STE 40  
ALACHUA, FL 326161180

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1180  
ATN: M.L.K.  
ALACHUA, FL 326161180

## New Mailing Address:

PO BOX 1180  
ALACHUA, FL 326161180

FEI Number: 59-0762130

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRYAN, MYRON W.  
12600 M.L.K. BLVD  
PO BOX 1180  
ALACHUA, FL 326161180

## 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: DV ( ) Delete  
Name: OELFKE, WAYNE R  
Address: 27717 NW 62ND AVE  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: DP ( ) Delete  
Name: BRYAN, MYRON W.,  
Address: 22416 OLD PROVIDENCE RD  
City-St-Zip: ALACHUA, FL 32615

Title: DS ( ) Delete  
Name: SHAW, MARILYN B  
Address: 16504 NW 32ND AVE  
City-St-Zip: NEWBERRY, FL 32669

Title: DT ( ) Delete  
Name: RUSHING, WINSTON  
Address: PO BOX 1252  
City-St-Zip: ALACHUA, FL 32616

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change ( ) Addition  
Name: DEAS, W B  
Address: 5510 SW 122ND STREET  
City-St-Zip: GAINESVILLE, FL 32608

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WINSTON RUSHING

DT

06/09/2003

Electronic Signature of Signing Officer or Director

Date