

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771343

FILED
Jan 25, 2011
Secretary of State

Entity Name: LEVY COUNTY FARM BUREAU LAA

Current Principal Place of Business:

312 EAST PARK AVENUE
CHIEFLAND, FL 32626 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 998
CHIEFLAND, FL 32644 US

New Mailing Address:

FEI Number: 59-0762995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITEHURST, VAN
10905 SW SR 45
ARCHER, FL 32618 US

Name and Address of New Registered Agent:

JOHNSON, OWEN C
550 NE 130TH STREET
TRENTON, FL 32693 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: OWEN

01/25/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S
Name: SOLLEY, IDA A
Address: PO BOX 456
City-St-Zip: WILLISTON, FL 32696

Title: D
Name: ETHERIDGE, BRAD
Address: PO BOX 237
City-St-Zip: WILLISTON, FL 32696

Title: D
Name: WHITEHURST, VAN
Address: 10905 S.W. SR 45
City-St-Zip: ARCHER, FL 32618

Title: D
Name: SACHE, WESLEY
Address: 13050 NW HWY 129
City-St-Zip: CHIEFLAND FL, FL 32696

Title: D
Name: SANDLIN, DAMON W
Address: 18251 NE 60TH ST
City-St-Zip: WILLISTON, FL 32696

Title: D
Name: HUDSON, ROLLIN
Address: PO BOX 502
City-St-Zip: CHIEFLAND, FL 32644

I hereby 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 all other like empowered.

SIGNATURE: OWEN

PRES

01/25/2011

Electronic Signature of Signing Officer or Director

Date