2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2012
Secretary of State

DOCUMENT# 790440

Entity Name: MARION COUNTY FARM BUREAU, LAA

Current Principal Place of Business:

5800 SW 20TH STREET
OCALA, FL 34474 US

New Principal Place of Business:

Current Mailing Address:

5800 SW 20TH STREET
OCALA, FL 34474 US

New Mailing Address:

FEI Number: 59-0674589 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RANDALL, RUSSELL
5800 SW 20TH STREET
OCALA, FL 34476 US

Name and Address of New Registered Agent:

LEFILS, JAMES
5800 SW 20TH STREET
OCALA, FL 34476 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: JAMES LEFILS 04/16/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP
Name: DAILEY, TODD
Address: 1420 SE 10TH AVE
City-St-Zip: OCALA, FL 34471

Title: D
Name: VERMILLION, JEFF
Address: 2951 E HWY 318
City-St-Zip: CITRA, FL 32113

Title: D
Name: KUNZ, AL
Address: 10850 NE COUNTY ROAD 315
City-St-Zip: FT. MCCOY, FL 32134

Title: SD
Name: THOMAS, SARAH JOE
Address: 18413 SW 69TH LOOP
City-St-Zip: OCALA, FL 34432

Title: D
Name: BOYER, JAMES
Address: 4214 SE 11T PL
City-St-Zip: OCALA, FL 34471

Title: TD
Name: LEWIS, D A JR
Address: 2930 SE 41ST PLACE
City-St-Zip: OCALA, FL 34480

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: JAMES LEFILS PRES 04/16/2012
Electronic Signature of Signing Officer or Director Date