

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 05, 2006 8:00 am**  
**Secretary of State**

05-05-2006 90156 012 \*\*\*\*61.25

**DOCUMENT # 790443**

1. Entity Name

JACKSON COUNTY FARM BUREAU LAA



Principal Place of Business

4379 LAFAYETTE ST  
MARIANNA FL 32446

Mailing Address

4379 LAFAYETTE ST  
MARIANNA FL 32446  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-0711690

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PITTMAN, JEFFERY  
3980 WINTERGREEN ROAD  
GREENWOOD FL 32443

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P  
NAME PITTMAN, JEFFERY  
STREET ADDRESS 4442 LAFAYETTE ST  
CITY - ST - ZIP GREENWOOD FL 32443 ☐ Delete

TITLE STD  
NAME FLOYD, HANK  
STREET ADDRESS 5881 OLD US ROAD  
CITY - ST - ZIP MALONE FL 32445 ☐ Delete

TITLE V  
NAME BRANCH, JASON  
STREET ADDRESS 7378 SHADY GROVE ROAD  
CITY - ST - ZIP GRAND RIDGE FL ☐ Delete

TITLE D  
NAME DILMORE, FORREST  
STREET ADDRESS P.O. BOX 941  
CITY - ST - ZIP COTTONDALE FL 32431 ☐ Delete

TITLE D  
NAME CALLOWAY, JAME  
STREET ADDRESS 4637 HWY 2  
CITY - ST - ZIP MALONE FL 32445 ☐ Delete

TITLE D  
NAME MCMILLAN, L.E. JR  
STREET ADDRESS 7130 GREEN RD  
CITY - ST - ZIP SNEADS FL 32460 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D  
NAME Jeff Crawford  
STREET ADDRESS 2542 Indian Springs Road  
CITY - ST - ZIP MARIANNA, FL 32446 ☐ Change ☒ Addition

TITLE D  
NAME Leland Thomas  
STREET ADDRESS 2953 Daniels St.  
CITY - ST - ZIP MARIANNA, FL 32446 ☐ Change ☒ Addition

TITLE D  
NAME Gordon Dietrich  
STREET ADDRESS 1987 Hwy 2  
CITY - ST - ZIP Graceville, FL 32440 ☐ Change ☒ Addition

TITLE D  
NAME Walter Lynn McKeithan  
STREET ADDRESS 2283 Aubrey Lane  
CITY - ST - ZIP Grand Ridge, FL 32442 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE

*[Signature]*

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(850) 492 5731