

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **790447** (7)

1. Corporation Name

LEE COUNTY FARM BUREAU, LAA.



Principal Place of Business

Mailing Address

**2744 E EDISON AVE.
FT MYERS FL 33916**

**2744 E EDISON AVE.
FT MYERS FL 33916**

3. Date Incorporated or Qualified
06/12/1967

3a. Date of Last Report
01/18/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1110069

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

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

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCMAHON, SHELLY D
8500 PENZANCE BLVD.
FORT MYERS FL 33912**

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Shelly D McMahon

SHELLY D MCMAHON, PRESIDENT

1/16/96

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **V** ☐ DELETE

NAME **SCHUETZ, JERRY**
STREET ADDRESS **15130 N. PEBBLE LANE**
CITY - ST - ZIP **FORT MYERS FL**

TITLE **T** ☐ DELETE

NAME **MCMAHON, ROBERT E. JR.**
STREET ADDRESS **8500 PENZANCE BLVD.**
CITY - ST - ZIP **FT MYERS, FL 33908**

TITLE **S** ☐ DELETE

NAME **MCMAHON, SHELLY D.**
STREET ADDRESS **8500 PENZANCE BOULEVARD**
CITY - ST - ZIP **FORT MYERS FL**

TITLE **P** ☒ DELETE

NAME **WALKER, J. A.**
STREET ADDRESS **17191 SLATER ROAD**
CITY - ST - ZIP **NORTH FT MYERS FL**

TITLE **D** ☐ DELETE

NAME **NYCHYK JR., ANDREW J.**
STREET ADDRESS **6287 FOXFIRE LAND**
CITY - ST - ZIP **FORT MYERS FL**

TITLE **D** ☐ DELETE

NAME **HAWKINS, GEORGE T. JR.**
STREET ADDRESS **17060 E. LAKE DR.**
CITY - ST - ZIP **NORTH FT MYERS FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

**SECRETARY
ROBERT E. MCMAHON
8500 PENZANCE BLVD.
FORT MYERS, FL 33912**

**PRESIDENT
SHELLY D MCMAHON
8500 PENZANCE BLVD
FORT MYERS, FL 33912**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Shelly D McMahon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**SHELLY D MCMAHON
PRESIDENT**

1/16/95

941-334-1953

Date

Daytime Phone #

CR2E037 (12/95)