

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790447

FILED  
Jan 26, 2009  
Secretary of State

Entity Name: LEE COUNTY FARM BUREAU, LAA.

## Current Principal Place of Business:

14180 METROPOLIS AVE  
SUITE 1  
FORT MYERS, FL 33912

## New Principal Place of Business:

## Current Mailing Address:

14180 METROPOLIS AVE  
SUITE 1  
FORT MYERS, FL 33912

## New Mailing Address:

FEI Number: 59-1110069

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ESPINOSA, VERONICA SEC.  
1014 SE 5TH ST  
CAPE CORAL, FL 33990 US

## 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: V ( ) Delete  
Name: PARKER, SHANE  
Address: 13500 PEACE RD  
City-St-Zip: FORT MYERS, FL 33905

Title: D ( ) Delete  
Name: ECKERT, TIM  
Address: 6490 SOUTH POINTE BLVD  
City-St-Zip: FORT MYERS, FL 33919

Title: D ( ) Delete  
Name: KELLY, KENT  
Address: 6901 HENDRY CREEK DRIVE  
City-St-Zip: FORT MYERS, FL 33908

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TIM ECKERTT

D

01/26/2009

Electronic Signature of Signing Officer or Director

Date