

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 790484

1. Entity Name

PINELLAS COUNTY FARM BUREAU LAA.

Principal Place of Business

~~13596 66TH ST
LARGO FL 33771~~

Mailing Address

~~13596 66TH ST
LARGO FL 33771
DS~~

2. Principal Place of Business

~~1165 Lakeview Road~~

3. Mailing Address

~~1165 Lakeview Road~~

Suite, Apt. #, etc.

City & State

~~Clearwater, FL~~

City & State

~~Clearwater, FL~~

Zip

~~33756~~

Country

~~United States~~

4. FEI Number

59-0792529

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

~~HUTCHCRAFT, SIDNEY
1943 ARMS CIRCLE WEST
CLEARWATER FL 33764~~

Name

Sidney Hutchcraft

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

~~2263 Glenmoor Road North~~

City

~~Clearwater~~

FL

Zip Code **33764**

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.

SIGNATURE

Sidney Hutchcraft

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW! FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	YPC Secretary MILLER, RICHARD 5800 SEMINOLE BLVD SEMINOLE FL 34842	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Sidney Hutchcraft 2263 Glenmoor Road North Clearwater, FL 33764	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRENTICE DORT PRENTICE DORT 304 BAMBOO LANE HARBOR BLUFF FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice- President Kay Routh P.O. Box 1034 Hernando, FL 34442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRY HANCOCK HARRY HANCOCK 1749 BELLAIR ROAD CLEARWATER FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Richard Miller 18200 U.S. 19 N Clearwater, FL 33764	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKEON, TOM MCKEON, TOM 11122 137TH ST LARGO FL 33774	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Fred Petty 14810 Rue De Bayonne #5H Clearwater, FL 33762	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DORT, PRENTICE DORT, PRENTICE 304 BAMBOO LANE HARBOR BLUFF FL 33770	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Richard Carroll 4450 38th Ave. N. St. Petersburg, FL 33710	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BROWN, KEN BROWN, KEN 14695 58TH ST N CLEARWATER FL 33760	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Al Repetto 18200 U.S. 19 N. Clearwater, FL 33764	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 RECD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)