

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2003 8:00 am**  
**Secretary of State**

04-21-2003 90356 023 \*\*\*\*\*61.25

**DOCUMENT # 790528**

1. Entity Name

**SEMINOLE COUNTY FARM BUREAU, LAA**



Principal Place of Business

**4195 N US HWY 1792  
SANFORD FLA 32773**

Mailing Address

**P.O. BOX 917191  
LONGWOOD FL 32779-7191  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-0860077**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**BISTLINE, FRED W.  
650 E BAY AVE  
LONGWOOD FL 32752**

7. Name and Address of New Registered Agent

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 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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>YARBOROUGH, IMOGENE</b>	
STREET ADDRESS	<b>P.O. BOX 65 N/A</b>	
CITY-ST-ZIP	<b>GENEVA FL 32732</b>	
TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>BISTLINE, FRED</b>	
STREET ADDRESS	<b>650 E. BAY AVENUE</b>	
CITY-ST-ZIP	<b>LONGWOOD FL 32752</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>HAMMOND, RUSSELL</b>	
STREET ADDRESS	<b>348 E. EVERGREEN</b>	
CITY-ST-ZIP	<b>LONGWOOD FL 32750</b>	
TITLE	<b>S</b>	<input type="checkbox"/> Delete
NAME	<b>PILOIAN, BILLY</b>	
STREET ADDRESS	<b>585 W CHURCH AVE</b>	
CITY-ST-ZIP	<b>LONGWOOD FL 32732</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>MALLOY, GRANT</b>	
STREET ADDRESS	<b>4875 GABRIELLA LN</b>	
CITY-ST-ZIP	<b>OVIDO FL 32765</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>BROWN, GEORGE</b>	
STREET ADDRESS	<b>1750 STONE STREET</b>	
CITY-ST-ZIP	<b>OVIDO FL 32765</b>	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>Director</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 REQUIRED**

**3-31-03 407-298-5058**

CR2E037 (10/02)

attachment 90098278  
790528

**SEMINOLE COUNTY FARM BUREAU**

**Board of Directors**

**2002-2003**

**OFFICERS**

Imogene Yarborough  
P. O. Box 65  
Geneva, FL. 32732

President  
FAX

Dale Babbitt  
1755 Stone St.  
Oviedo, FL. 32765

Vice-President

Bill Piloian  
585 W. Church St.  
Longwood, FL. 32750

Sec-Treasurer

Russ Hammond  
348 East Evergreen  
Longwood, FL. 32750

**DIRECTORS**

Fred Bistline  
650 East Bay St.  
Longwood, FL. 32750

George Brown  
1750 Stone Rd.  
Deland, FL.

Spencer G. Douglass  
1180 Spring Centre, South Blvd.  
Altamonte Springs, FL. 32714

Grant Maloy  
4875 Gabriella Ln.  
Oviedo, FL. 32765-8695

Attachment  
90098278  
7905, 28

George Means  
P. O. Box 620411  
Oviedo, FL. 32762

J. W. Yarborough  
P. O. Box 65  
Geneva, FL. 32732