

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790610

FILED
Feb 02, 2009
Secretary of State

Entity Name: DESOTO-CHARLOTTE FARM BUREAU, LAA

Current Principal Place of Business:

1278 S.E. HWY 31
ARCADIA, FL 34266 US

New Principal Place of Business:

Current Mailing Address:

1278 S.E. HWY 31
ARCADIA, FL 34266 US

New Mailing Address:

FEI Number: 59-0817948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRISON, KENNETH
9180 NW LILY AVE
ARCADIA, FL 34266 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: VD () Delete
Name: ADAMS, JEFFREY
Address: 5539 NW COKER STREET
City-St-Zip: ARCADIA, FL 34266

Title: PD () Delete
Name: HARRISON, KENNETH
Address: 9180 NW LILY AVE
City-St-Zip: ARCADIA, FL 34266

Title: D () Delete
Name: CARTER, MIKE
Address: 6096 HORTON DR
City-St-Zip: ARCADIA, FL 34266

Title: STU () Delete
Name: SELPH, JIM
Address: P.O. BOX 310
City-St-Zip: ARCADIA, FL 34266

Title: D () Delete
Name: BURTSCHER, JOHN
Address: 3673 NW POULTRY ST
City-St-Zip: ARCADIA, FL 34266

Title: D () Delete
Name: BREWER, JIM
Address: 5597 SW COUNTY RD 760
City-St-Zip: ARCADIA, FL

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:

Title: () Change () Addition
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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: KENNETH HARRISON

PD

02/02/2009

Electronic Signature of Signing Officer or Director

Date