

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 11, 2006
Secretary of State

DOCUMENT# 790611

Entity Name: SUMTER COUNTY FARM BUREAU LAA**Current Principal Place of Business:**7610 SR 471
BUSHNELL, FL 33513 US**New Principal Place of Business:****Current Mailing Address:**7610 SR 471
BUSHNELL, FL 33513 US**New Mailing Address:****FEI Number:** 59-1028366**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**G.O PARROTT JR
6874 CR 736
BUSHNELL, FL 33513 US**Name and Address of New Registered Agent:**KELLY RICE
1034 W C-48
BUSHNELL, FL 33513 US

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: KELLY RICE

07/11/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: RICE, KELLY
Address: 1912 C 478 A (PO BOX 648)
City-St-Zip: WEBSTER, FL 33597

Title: PD () Delete
Name: PARROTT, GEORGE O
Address: 2354 SE 47TH RD
City-St-Zip: BUSHNELL, FL 33513

Title: STD () Delete
Name: CAMP, JOEL
Address: 11699 CR 727
City-St-Zip: WEBSTER, FL 33597

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: RICE, KELLY
Address: 1912 C 478 A (PO BOX 648)
City-St-Zip: WEBSTER, FL 33597

Title: VC (X) Change () Addition
Name: CAMP, JOEL
Address: 11699 CR 727
City-St-Zip: WEBSTER, FL 33597

Title: STD (X) Change () Addition
Name: REVELS, SHIRLEY
Address: 6642 CR 561
City-St-Zip: BUSHNELL, FL 33597

I hereby certify that the information supplied with this filing does not qualify for the 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: KELLY RICE

PRES

07/11/2006

Electronic Signature of Signing Officer or Director

Date