

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90140 035 ****61.25

DOCUMENT # 790631

1. Entity Name

MARTIN COUNTY FARM BUREAU, LAA

Principal Place of Business

Mailing Address

**2227 S. KANNER HWY
 STUART FL 34994**

**2227 S. KANNER HWY
 STUART FL 34994-4619**

608916



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-6177729

Applied For

Not Applied For

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MINEAR, JUDSON
 2227 S KANNER HWY
 STUART FL 34994**

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.

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
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.

TITLE **P** Delete
 NAME **SCARBOROUGH, JOHN**
 STREET ADDRESS **2227 S KANNER HWY**
 CITY-ST-ZIP **STUART FL**

TITLE **P** Change Addition
 NAME **ERIC NISSEN**
 STREET ADDRESS **PO BOX 573**
 CITY-ST-ZIP **Hobe Sound, FL 33475**

TITLE **D** Delete
 NAME **NISSEN, ERIC**
 STREET ADDRESS **2227 S KANNER HWY**
 CITY-ST-ZIP **STUART FL**

TITLE **VP** Change Addition
 NAME **ROBERT SNYDER**
 STREET ADDRESS **3001 S. KANNER HWY.**
 CITY-ST-ZIP **STUART, FL 34997**

TITLE **T** Delete
 NAME **MINEAR, JUDSON**
 STREET ADDRESS **2227 S KANNER HWY**
 CITY-ST-ZIP **STUART FL**

TITLE **D** Change Addition
 NAME **JOHN SCARBOROUGH**
 STREET ADDRESS **PO BOX 1746**
 CITY-ST-ZIP **JUPITER, FL 33468**

TITLE **D** Delete
 NAME **WHITTY, ROBERT**
 STREET ADDRESS **2614 SE DIXIE HWY**
 CITY-ST-ZIP **STUART FL 34996**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **REMELIUS, PAUL**
 STREET ADDRESS **2227 S KANNER HWY**
 CITY-ST-ZIP **STUART FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change 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:

Judson Minear **7-20-00 561-286-1038**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #