2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# 790635

Entity Name: PALM BEACH COUNTY FARM BUREAU LAA

Current Principal Place of Business:

13121 N MILITARY TRAIL
DELRAY BCH, FL 33484

New Principal Place of Business:

Current Mailing Address:

13121 N MILITARY TRAIL
DELRAY BCH, FL 33484

New Mailing Address:

FEI Number: 59-0723473 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRASWELL, CARY
12549 OAK RUN CT
BOYNTON BEACH, FL 334366149 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:	MACHEK, RICHARD	
Address:	17 NW 16TH ST	
City-St-Zip:	DELRAY BEACH, FL	
Title:	D	( ) Delete
Name:	BOWMAN, DICK,	
Address:	14339 SMITH SUNDY RD	
City-St-Zip:	DELRAY BEACH, FL 33446	
Title:	S	( ) Delete
Name:	DELL, BONNIE,	
Address:	3907 LOWSON BLVD	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	D	( ) Delete
Name:	HALEY, VAL JEAN,	
Address:	10932 GLENEAGLES RD	
City-St-Zip:	BOYNTON BEACH, 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
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: CARY BRASWELL PRES 03/19/2009

Electronic Signature of Signing Officer or Director — Date