

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790636

FILED
Mar 25, 2012
Secretary of State

Entity Name: WESTERN PALM BEACH COUNTY FARM BUREAU, LAA

Current Principal Place of Business:

3019 STATE ROAD 15
STE 5
BELLE GLADE, FL 33430 US

New Principal Place of Business:

Current Mailing Address:

3019 STATE ROAD 15
STE 5
BELLE GLADE, FL 33430 US

New Mailing Address:

FEI Number: 59-0865201 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HOLT, ANN
457 OLD COUNTRY RD
WEST PALM BEACH, FL 33414 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: PD
Name: HOLT, ANN
Address: 457 OLD COUNTRY RD
City-St-Zip: WEST PALM BEACH, FL 33414

Title: S
Name: STEIN, STEWART
Address: 1625 WEDGEWORTH RD
City-St-Zip: BELLE GLADE, FL 33430

Title: VP
Name: PRIELOZNY, STEVE
Address: 108 SOUTHEAST AVENUE D
City-St-Zip: BELLE GLADE, FL 33430

Title: VP
Name: MCKINSTRY, BUDDY
Address: 17355 64TH PL, N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: T
Name: SODDERS, MARK
Address: 505 GREENWAY DR.
City-St-Zip: NORTH PALM BEACH, FL 33408

I hereby 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 all other like empowered.

SIGNATURE: ANN HOLT

PRES

03/25/2012

Electronic Signature of Signing Officer or Director

Date