2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790659

FILED Apr 09, 2009 Secretary of State

Entity Name: HIGHLANDS COUNTY FARM BUREAU, LAA

Current Principal Place of Business: New Principal Place of Business:

6419 US 27 SOUTH SEBRING, FL 33876 US

Current Mailing Address: New Mailing Address:

6419 US 27 SOUTH SEBRING, FL 33876 US

FEI Number: 59-1028609 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ANDREWS, TOM 731 LAKESIDE RD SEBRING, FL 33870 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition ANDREWS, TOM ELLIOTT, MATT K Name: Name:

731 LAKESIDE RD Address: 711 HILLCREST AVENUE Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: LAKE PLACID, FL 33852 US

(X) Change () Addition Title: Title: () Delete Name:

MARTY, WOHL Name: MARTY, WOHL M Address: 3200 US HWY 27, SOUTH Address: 3200 US HWY 27, SOUTH City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 US

Title: () Delete Title: (X) Change () Addition

PHYPERS, DREW PHYPERS, DREW W Name: Name:

Address: 77 D PLACE Address: 77 D PLACE

City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: LAKE PLACID, FL 33852 US

Title: () Delete Title: (X) Change () Addition

Name: KIROUAC, SCOTT Name: KIROUAC, SCOTT A Address: 320 KITE AVE Address: 320 KITE AVE

SEBRING, FL 33872 City-St-Zip: City-St-Zip: SEBRING, FL 33872 US

Title: () Delete Title: (X) Change () Addition

BRYAN, MARK ANDREWS, TOM Name: Name: 12001 ARBUCKEL CREEK RD 731 LAKESIDE ROAD Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 US

Title: () Delete Title: (X) Change () Addition

BRONSON, JUDY BRONSON, SAM Name: Name: Address: 140 MONTSDEOCA LANE Address: 6032 WILSON TERRACE LORIDA, FL 33857 SEBRING, FL 33876 US City-St-Zip: 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: MATT K. ELLIOTT **PRES** 04/09/2009

Electronic Signature of Signing Officer or Director

Date