

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90023 022 ****70.00

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1. Entity Name

BAKER COUNTY FARM BUREAU LAA



Principal Place of Business

539 SOUTH 6TH ST
MCCLENNY FL 32063

Mailing Address

539 SOUTH 6TH ST
MCCLENNY FL 32063

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-6177715

Applied For

Not Applicable

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

DARRYL, REGISTER
GLENWOOD DRIVE
9452 BOX
GLEN SAINT MARY FL 32040

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE: ST ☐ Delete
NAME: REGISTER, DARRYL
STREET ADDRESS: REGISTER RD, BOX 839
CITY-ST-ZIP: SANDERSON FL

TITLE: D ☒ Delete
NAME: RHODEN, LOUISE
STREET ADDRESS: STATE RD 23-C
CITY-ST-ZIP: MACCLENNY FL

TITLE: VP ☐ Delete
NAME: FISH, PATRICIA L
STREET ADDRESS: 7433 PIERCE RD.
CITY-ST-ZIP: GLEN SAINT MARY FL 32040

TITLE: D ☐ Delete
NAME: ROWE, CHARLES
STREET ADDRESS: ROWE RD BOX 740
CITY-ST-ZIP: MACCLENNY FL 32040

TITLE: P ☐ Delete
NAME: REGISTER, LLOYD A
STREET ADDRESS: REGISTER RD BOX 840
CITY-ST-ZIP: SANDERSON FL 32087

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: President ☒ Change ☐ Addition
NAME:
STREET ADDRESS: Glenwood Drive, 9452 Box
CITY-ST-ZIP: GLEN ST. MARY FL 32040

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: Streas. ☒ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: VP ☒ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: Director ☒ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: Director ☐ Change ☒ Addition
NAME: Wymon GRIFFIS
STREET ADDRESS: 6560 Bill DAVIS RD
CITY-ST-ZIP: GLEN ST. MARY FL 32040

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Darryl Register* Darryl Register, Pres.

904 259-6332