FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 20 PM 2:19

DOCUMENT # 790685 (2)

1. Corporation Name
MADISON COUNTY FARM BUREAU, LAA

Principal Place of Business	Mailing Address
503 W. BASE ST. MADISON FL 32340-2005	503 W. BASE ST. MADISON FL 32340-2005

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/12/1952
3a. Date of Last Report: 02/25/1994
4. FEI Number: 59-0817185 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired: XX $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

TERRY, RICHARD
RT 1, BOX 2295
MADISON FL 32340

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DV	1.1 TITLE	DV	☒ Change ☐ Addition
NAME	PAARLBERG, CHARLES	1.2 NAME	Paarlberg, Charles	
STREET ADDRESS	RT 1 BOX 1195/NA	1.3 STREET ADDRESS	Rt. 1, Box 1195/NA	
CITY-ST-ZIP	LEE FL	1.4 CITY-ST-ZIP	Lee, Fl 32059-9723	
TITLE	D	2.1 TITLE	D	☒ Change ☐ Addition
NAME	WILLIAMS, AARON	2.2 NAME	Williams, Aaron	
STREET ADDRESS	RT 1 BOX 188/NA	2.3 STREET ADDRESS	Rt. 1, Box 188/NA	
CITY-ST-ZIP	LEE, FL 00000	2.4 CITY-ST-ZIP	Lee, Fl 32059-9705	
TITLE	D	3.1 TITLE	D	☒ Change ☐ Addition
NAME	SAPP, DOZIER E	3.2 NAME	Sapp, Dozier E.	
STREET ADDRESS	RT 1 BOX 930/NA	3.3 STREET ADDRESS	Rt. 1, Box 930/NA	
CITY-ST-ZIP	MADISON, FL 00000	3.4 CITY-ST-ZIP	Madison, Fl 32340-9412	
TITLE	STD	4.1 TITLE	STD	☒ Change ☐ Addition
NAME	SEARCEY, BOB	4.2 NAME	Searcy, Bob	
STREET ADDRESS	RT 2 BOX 1000/NA	4.3 STREET ADDRESS	Rt. 2, Box 1000/NA	
CITY-ST-ZIP	MADISON, FL 00000	4.4 CITY-ST-ZIP	Madison, Fl 32340-9626	
TITLE	D	5.1 TITLE	D	☒ Change ☐ Addition
NAME	WEBB, JOHN C	5.2 NAME	Webb, John C	
STREET ADDRESS	RT 1 BOX 92/NA	5.3 STREET ADDRESS	Rt. 1, Box, 92/NA	
CITY-ST-ZIP	LEE, FL 00000	5.4 CITY-ST-ZIP	Lee, Fl 32059-9753	
TITLE	DP	6.1 TITLE	DP	☒ Change ☐ Addition
NAME	TERRY, RICHARD	6.2 NAME	Terry, Richard	
STREET ADDRESS	RT.1, BOX 2295/NA	6.3 STREET ADDRESS	Rt. 1, Box 2295/NA	
CITY-ST-ZIP	MADISON FL	6.4 CITY-ST-ZIP	Madison, Fl 32340-9425	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Charles Terry 3-16-95 (901) 473-1671
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

002061

MADISON COUNTY FARM BUREAU
503 West Base Street, Madison, FL 32340, Telephone (904) 973-4071

March 3, 1995

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, Fl 32302-1500

RE: Madison County Farm Bureau
503 W. Base St.
Madison, Fl 32340

Document # 790685

To Whom It May Concern:

Please add the following to our list of Officers and Directors:

D
Bradfield, Don
Rt. 1, Box 865/NA
Lee, Fl 32059-9758

D
Cone, Richard
Rt. 2, Box 260/NA
Greenville, Fl 32331-9527

D
Hudson, Wayne
Rt. 3, Box 127/NA
Greenville, Fl 32331-9316

D
Ragans, Ben
Rt. 2, Box 955/NA
Madison, Fl 32340-9433

D
Ragans, Jimmie
Rt. 1, Box 3330/NA
Madison, Fl 32340-9433

D
Waring, Howell
Rt. 4, Box 1255/NA
Madison, Fl 32340-9727

MADISON COUNTY FARM BUREAU
503 West Base Street, Madison, FL 32340, Telephone (904) 973-4071

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, Fl 32302-1500

RE: Madison County Farm Bureau
503 W. Base St.
Madison, Fl 32340

Document # 790685

If you have any questions please call our office at (904) 973-4071.

Thank You,

Charles Paarlberg
Madison County Farm Bureau