

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

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

3. Date Incorporated or Qualified  
09/12/1952

3a. Date of Last Report  
03/20/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-0817185

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

24

25

Country

29

30

Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TERRY, RICHARD  
RT 1, BOX 2295  
MADISON FL 32340

81 Name

Waring, Howell

82 Street Address (P.O. Box Number is Not Acceptable)

Rt. 4, Box 1255

83

84 City

Madison

FL

85

Zip Code  
32340

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

*X M H Waring*  
Signature, typed or printed name of registered agent and applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME DV  
STREET ADDRESS PAARLBERG, CHARLES  
CITY-ST-ZIP RT 1 BOX 1195/NA  
LEE FL

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME D  
STREET ADDRESS WILLIAMS, AARON  
CITY-ST-ZIP RT 1 BOX 188/NA  
LEE, FL 00000

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME D  
STREET ADDRESS SAPP, DOZIER E  
CITY-ST-ZIP RT 1 BOX 930/NA  
MADISON, FL 00000

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME STD  
STREET ADDRESS SEARCEY, BOB  
CITY-ST-ZIP RT 2 BOX 1000/NA  
MADISON, FL 00000

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME D  
STREET ADDRESS WEBB, JOHN C  
CITY-ST-ZIP RT 1 BOX 92/NA  
LEE, FL 00000

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME DP  
STREET ADDRESS TERRY, RICHARD  
CITY-ST-ZIP RT.1, BOX 2295/NA  
MADISON FL

6.1 TITLE ☒ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS Terry, Richard  
6.4 CITY-ST-ZIP Rt. 1, Box 2295  
Madison, FL 32340

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)(k), 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

*M H Waring*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-96

Date

(904) 973-4071

Daytime Phone #

CR2E037 (12/95)



## 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

*Please note this change*  
2.16.96