

6/20/01

FILED
Jul 02, 2001 8:00 am
Secretary of State

06-20-2001 90007 012 ****70.00

05/03/2001 10:18 3523842601

FED ACCT

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 790685**

1. Entity Name

Madison County Farm Bureau

Principal Place of Business

503 West Base Street
Madison, FL 32340

Mailing Address

503 West Base Street
Madison, FL 32340

2. Principal Place of Business

Subm. Apt. #, etc.

3. Mailing Address

Subm. Apt. #, etc.

City & State

City & State

4. FEI Number

59-0817185

Applied for

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐\$0.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Howell Waring
Rt 4-Box 1225
Madison, FL 32340

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, name or printed name of registered agent for this application

Name Registered Agent appears checked when changing

Date

9. Election Campaign Financing
From Fund Contribution ☐\$0.00 shall be
added to Fees10. Election Campaign Financing
From Other Sources ☐

10. OFFICERS AND DIRECTORS		11. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	Charles Paarlberg ☐ Delete	TITLE	Richard Cone ☐ Change ☒ Addition
NAME	Rt 1 Box 1195	NAME	Rt 4 Box 259
STREET ADDRESS	Lee, FL 32059	STREET ADDRESS	Greenville, FL 32331
CITY-ST-SP		CITY-ST-SP	
TITLE	Aaron Williams ☐ Delete	TITLE	William (Bubba) Greene ☐ Change ☒ Addition
NAME	Rt 1 Box 2435	NAME	PONBOX38-1berg
STREET ADDRESS	Lee, FL 32059	STREET ADDRESS	Madison, FL 32340
CITY-ST-SP		CITY-ST-SP	
TITLE	Bob Searcy ☐ Delete	TITLE	Ginny Paarlberg ☐ Change ☒ Addition
NAME	Rt 2 Box 1000	NAME	Rt 1 Box 1195
STREET ADDRESS	Madison, FL 32340	STREET ADDRESS	Lee, FL 32059
CITY-ST-SP		CITY-ST-SP	
TITLE	John C. Webb ☐ Change	TITLE	Ben Ragans ☐ Change ☒ Addition
NAME	Rt 1 Box 510	NAME	Rt 2 Box 955
STREET ADDRESS	Lee, FL 32059	STREET ADDRESS	Madison, FL 32340
CITY-ST-SP		CITY-ST-SP	
TITLE	Richard Terry ☐ Delete	TITLE	Jimmie Ragans ☐ Change ☒ Addition
NAME	Rt 1 Box 2295	NAME	Rt 1 Box 3330
STREET ADDRESS	Madison, FL 32340	STREET ADDRESS	Madison, FL 32340
CITY-ST-SP		CITY-ST-SP	
TITLE	Don Bradfield ☐ Delete	TITLE	Howell Waring ☐ Change ☒ Addition
NAME	Rt 1 Box 865	NAME	Rt 4 Box 1225
STREET ADDRESS	Lee, FL 32059	STREET ADDRESS	Madison, FL 32340
CITY-ST-SP		CITY-ST-SP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(2)(b), 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 filers empowered.

SIGNATURE: *W. Waring*

05/02/01

(850) 973-4071

Signature and name of registered agent for this application

Printed Name