

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790685

FILED
Jan 07, 2009
Secretary of State

Entity Name: MADISON COUNTY FARM BUREAU, LAA

Current Principal Place of Business:

233 W BASE ST
MADISON, FL 32340

New Principal Place of Business:

Current Mailing Address:

233 W BASE ST
MADISON, FL 32340

New Mailing Address:

FEI Number: 59-0817185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMRICK, JEFFREY
2942 SW SUNDOWN CIR RD
GREENVILLE, FL 32331 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GREENE, BUBBA
Address: PO BOX 38
City-St-Zip: MADISON, FL 32341

Title: D () Delete
Name: WILLIAMS, AARON,
Address: RT 1 BOX 2435
City-St-Zip: LEE, FL 32059

Title: D () Delete
Name: SEARCY, BOB
Address: RT 2 BOX 1000
City-St-Zip: MADISON, FL 32340

Title: D () Delete
Name: WEBB, JOHN C
Address: RT 1 BOX 510
City-St-Zip: LEE, FL 32059

Title: D () Delete
Name: TERRY, RICHARD
Address: RT 1 BOX 2295
City-St-Zip: MADISON, FL 32340

Title: D () Delete
Name: RAGANS, BEN
Address: 1532 NE MACEDOMIE CHURCH RD
City-St-Zip: MADISON, FL 32340

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WILLIAMS, AARON,
Address: 3340 NE COTTON WOOD TRAIL
City-St-Zip: LEE, FL 32059

Title: D (X) Change () Addition
Name: SEARCY, BOB
Address: 6753 E HWY 90
City-St-Zip: MADISON, FL 32340

Title: D (X) Change () Addition
Name: WEBB, JOHN C
Address: 176 SE PIONEER STREET
City-St-Zip: LEE, FL 32059

Title: D (X) Change () Addition
Name: TERRY, RICHARD
Address: 405 SE GUNPOWER AVE
City-St-Zip: MADISON, FL 32340

Title: () Change () Addition
Name:
Address:
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: JEFFERY HAMRICK

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date