

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 #

1. Corporation Name

790741

( 3 )

GULF COUNTY FARM BUREAU, LAA

Principal Place of Business

Mailing Address

615 N MAIN STREET

615 N. MAIN STREET

BLOUNTSTOWN, FL. 32424 BLOUNTSTOWN, FL 32424

3. Date Incorporated or Qualified

11/12/1955

3a. Date of Last Report

05/01/95

4. FEI Number

59-6177725

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

L.L. LANIER

HWY 71 SOUTH

WEWAHITCHKA, FL 32465

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 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

*L.L. Lanier*  
Signature, typed or printed name of registered agent and title if applicable

L.L. Lanier Pres

3-15-96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME  
LANIER, L L

STREET ADDRESS  
HWY 71 SOUTH

CITY - ST - ZIP  
WEWAHITCHKA, FL 32465

TITLE ☐ DELETE

NAME  
C.R. LAIRD

STREET ADDRESS  
HWY 71 SOUTH

CITY - ST - ZIP  
WEWAHITCHKA, FL 32465

TITLE ☐ DELETE

NAME  
JONES, MILDRED

STREET ADDRESS  
HWY 71S.

CITY - ST - ZIP  
WEWAHITCHKA, FL 32465

TITLE ☐ DELETE

NAME  
WILLIAMS, CURTIS

STREET ADDRESS  
120 LAKE GROVE RD

CITY - ST - ZIP  
WEWAHITCHKA, FL 32465

TITLE ☒ DELETE

NAME  
PEAK, PAUL

STREET ADDRESS  
RT 1 BOX 660

CITY - ST - ZIP  
WEWAHITCHKA, FL 32465

TITLE ☐ DELETE

NAME  
CLECKLEY, CHARLES

STREET ADDRESS  
RIVER ROAD

CITY - ST - ZIP  
WEWAHITCHKA, FL 32465

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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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:

*L.L. Lanier*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

L.L. Lanier

Date

3-15-96

Daytime Phone #

904-674-5471

CR2E037 (12/95)

3-21-1996