

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790770

FILED  
Mar 19, 2012  
Secretary of State

**Entity Name:** DUVAL COUNTY FARM BUREAU LAA

**Current Principal Place of Business:**

5542 DUNN AVENUE  
JACKSONVILLE, FL 32218

**New Principal Place of Business:**

**Current Mailing Address:**

5542 DUNN AVENUE  
JACKSONVILLE, FL 32218

**New Mailing Address:**

**FEI Number:** 59-0936100

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JONES, HAROLD C  
1681 HIDDEN FOREST LN  
JACKSONVILLE, FL 32225 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: DT  
Name: DALTON DOWDY  
Address: 11250 BRIDGES RD  
City-St-Zip: JACKSONVILLE, FL 00000, FL 32218

Title: VP  
Name: BRADDOCK, TOM  
Address: 1628 S. FLETCHER AVE.  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: DT  
Name: SCARBOROUGH, WAYNE  
Address: P.O. BOX 239  
City-St-Zip: BRYCEVILLE, FL 32009

Title: DT  
Name: MOORE, CURTIS E.  
Address: 5542 DUNN AVE  
City-St-Zip: JACKSONVILLE, FL 00000,

Title: ST  
Name: ALVAREZ, WARREN  
Address: 13923 DUVAL RD  
City-St-Zip: JACKSONVILLE, FL 32218

I hereby 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 all other like empowered.

SIGNATURE: HAROLD C. JONES

PRES

03/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date