

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 26, 2005 8:00 am
Secretary of State

01-26-2005 90006 018 ****61.25

DOCUMENT # 790782

1. Entity Name

MANATEE COUNTY FARM BUREAU LAA



Principal Place of Business

2701 FIRST STREET EAST
BRADENTON FL 34208

Mailing Address

2701 FIRST STREET EAST
BRADENTON FL 34208

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E037 (10/04)

4. FEI Number

59-0911022

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GARRISON, RALPH
6012- 18TH AVE EAST
BRADENTON FL 34208

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	TD TAYLOR, HUGH	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	11401 AD TAYLOR RD	
CITY-ST-ZIP	MYAKKA CITY FL 34251-946	
TITLE NAME	SD KING, BEN	<input type="checkbox"/> Delete
STREET ADDRESS	347 WILLOW LANE	
CITY-ST-ZIP	ELLENTON FL 34222	
TITLE NAME	PO GARRISON, RALPH	<input type="checkbox"/> Delete
STREET ADDRESS	6012 18TH AVE, E	
CITY-ST-ZIP	BRADENTON FL 34208-611	
TITLE NAME	VD WEST, DAN	<input type="checkbox"/> Delete
STREET ADDRESS	1525 17TH ST W	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

TITLE NAME	TD Robert Zeliff	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	12603 Upper Manatee River Rd	
CITY-ST-ZIP	Bradenton, FL 34212	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 like empowered.

SIGNATURE:

R. Lee

Raymond Lee-Executive Director 1/19/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 941-746-6161 Page Phone #