

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790782

FILED
Feb 26, 2009
Secretary of State

Entity Name: MANATEE COUNTY FARM BUREAU LAA

Current Principal Place of Business:

2701 FIRST STREET EAST
BRADENTON, FL 34208

New Principal Place of Business:

5620 TARA BLVD
SUITE 101
BRADENTON, FL 34203

Current Mailing Address:

2701 FIRST STREET EAST
BRADENTON, FL 34208

New Mailing Address:

5620 TARA BLVD
SUITE 101
BRADENTON, FL 34203

FEI Number: 59-0911022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARRISON, RALPH
6012- 18TH AVE EAST
BRADENTON, FL 34208 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: TD () Delete
Name: ZELIFF, ROBERT
Address: 12603 UPPER MANATEE RIVER ROAD
City-St-Zip: BRADENTON, FL 34212

Title: SD () Delete
Name: KING, BEN
Address: 347 WILLOW LANE
City-St-Zip: ELLENTON, FL 34222

Title: PO () Delete
Name: GARRISON, RALPH
Address: 6012 18TH AVE, E
City-St-Zip: BRADENTON, FL 34208-611

Title: VD () Delete
Name: WEST, DAN
Address: 1525 17TH ST W
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: RALPH GARRISON

MR

02/26/2009

Electronic Signature of Signing Officer or Director

Date