2002 UNIFORM BUSINESS REPORT (UBR) FILED Apr 23, 2002 8:00 am Secretary of State **DOCUMENT # 790786** 1. Entity Name OKEECHOBEE COUNTY FARM BUREAU LAA 04-23-2002 90362 028 ****61.25 Principal Place of Business Mailing Address 401 N.W. 4TH ST. 401 N.W. 4TH ST. OKEECHOBEE FL 34972 OKEECHOBEE FL 34972 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1102390 Not Applicable Zip Country Zip Country' \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BOREE, JAMES E JR. 121 S.E. 17TH STREET OKEECHOBEE FL 34974 City 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 Fiorida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** · OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. (9/01) TITLE ☐ Delete TITLE ☐ Change Addition NAME BOREE, JAMES E JR. STREET ADDRESS STREET ADDRESS 121 SE 17TH ST CITY-ST-ZIP CITY-ST-ZIP OKEECHOBEE FL 34974 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME BURNHAM, RANDY L NAME STREET ADDRESS 1982 NE 54TH TRAIL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OKEECHOBEE FL 34972 TITLE ☐ Delete TITLE Change ☐ Addition ROGERS, STEVE NAME STREET ADDRESS STREET ADDRESS 6314 NW 30TH ST CITY-ST-ZIP CITY-ST-7IP <u>okeechobee</u> fl TITLE Delete VD. VD TITLE (X) Change ■ Addition JONES, DONALD R NAME David E Raulerson, Jr STREET ADDRESS STREET ADDRESS 7740 SW 13TH ST 12900 NW 144th Trail CITY-ST-ZIE CITY-ST-ZIF OKEECHOBEE FL 34974

CITY-\$T-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

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

BASS, J.C.

16205 HWY 98 NORTH

OKEECHOBEE FL 34972

10.

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIE

James E Boree Jr 04-12-2002 GNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

Okeechobee FL

863-763-3101

34972

Daytime Phone #

☐ Change

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☐ Addition

Addition