

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 15, 2003 8:00 am**  
**Secretary of State**

01-15-2003 90317 008 \*\*\*\*61.25

**DOCUMENT # 790792**

1. Entity Name

**INDIAN RIVER COUNTY FARM BUREAU, A LIMITED AGRIC  
ULTURAL ASSOCIATION**



Principal Place of Business

**1120 -20TH PLACE  
VERO BEACH FL 32960  
US**

Mailing Address

**1120 -20TH PLACE  
VERO BEACH FL 32960  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**TEMPLE, ALAN  
1042 NEAR OCEAN DRIVE  
VERO BEACH FL 32963**

7. Name and Address of New Registered Agent

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**

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

TITLE	P	NAME	TEMPLE, ALAN	<input type="checkbox"/> Delete
STREET ADDRESS			1042 NEAR OCEAN DRIVE	
CITY-ST-ZIP			VERO BEACH FL 32963	
TITLE	VP	NAME	BASS, JEFF	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			P. O. BOX 277	
CITY-ST-ZIP			WABASSO FL 32970	
TITLE	S	NAME	JOHNSON, JERRY D	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			410 - 45TH COURT	
CITY-ST-ZIP			VERO BEACH FL 32968	
TITLE	D	NAME	TRIPSON, ROBERT D	<input type="checkbox"/> Delete
STREET ADDRESS			5020 -12 STREET	
CITY-ST-ZIP			VERO BEACH FL 32966	
TITLE	D	NAME	BYNUM, KEVIN	<input type="checkbox"/> Delete
STREET ADDRESS			22200 STATE RD 60	
CITY-ST-ZIP			VERO BEACH FL 32966	
TITLE	D	NAME	SIMPSON, JIMMY	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			4725- 70TH TERR	
CITY-ST-ZIP			VERO BEACH FL 32967	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jerry D. Johnson	
STREET ADDRESS	410 45th Court	
CITY-ST-ZIP	VERO BEACH, FL 32968-1843	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jeff Bass	
STREET ADDRESS	P.O.Box 277	
CITY-ST-ZIP	Wabasso, FL 32970	
TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jimmy Simpson	
STREET ADDRESS	4725 70th Terrace	
CITY-ST-ZIP	Vero Beach, FL 32967	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mike Lillie	
STREET ADDRESS	1820 Ocean Breeze Street	
CITY-ST-ZIP	Sebastian, FL 32958	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mark Sanchez	
STREET ADDRESS	7025 8th Street	
CITY-ST-ZIP	Vero Beach, FL 32968	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Joe Earman, Jr.	
STREET ADDRESS	4375 9th Lane	
CITY-ST-ZIP	Vero Beach, FL 32966	

2. 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: **Alan M. Temple**  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

January 10, 2003 772-562-4119

0016891

CR2E037 (10/02)

Attachment

20008543



## INDIAN RIVER COUNTY FARM BUREAU

1120 20th Place • Vero Beach, FL 32960-5362

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### ADDITIONAL DIRECTORS:

<u>Director</u>	<u>XAddition</u>
Thomas Hurley	
2627 S. Jenkins Road	
Ft. Pierce, FL 34981	

<u>Director</u>	<u>XAddition</u>
Billy Thompson	
P.O.Box 758	
Wabasso, FL 32970	

<u>Director</u>	<u>XAddition</u>
Charles M. Shinn, III	
P.O.Box 690342	
Vero Beach, FL 32969	