## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 13 1997 8:00am

Secretary of State

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## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # 79

SIGNATURE:

790796

(7)

## BAY COUNTY FARM BUREAU LAA

			11 Pr 4 1			. `							
Principal Place of Business Mailing Address											• • . •	., ., ., ., ., ., .,	
2909 HWY 77 PANAMA CITY F	FL 32405	P.O. BOX 726 PANAMA CITY FL 32402-0726											
US									3. Date Incorp	orated or Qualified 1958	3a. D	ate of Last Re 01/29/199	port 6
2. Principal Pi	lace of Busine:	28. Mailing	28. Mailing Address 26					4. FEI Number 59-6177716			Applied For Not Applicable		
Suite, Apt.		Suite, Apt. #, etc.						5. Certificate o	of Status Desired		\$8.75 A Fee Re		
City & State	e	City & State					6. Election Campaign Financing \$5.00 May Be						
<b>23</b>	· ·· · · · · · · · · · · · · · · · · ·	Zip Country					Trust Fund Contribution Added to Fees						
24 .	2	Country	29 30			Journal		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No					
24 7		nd Address of Current		gent	[30]	1				Address of New Re			
						81	Name	MTTJ	DON DAUPH	ITN	,		
George McAdams 2212 Washington Street						82	Street A	Street Address (P.O. Box Number is Not Acceptable) 1538 PRIMROSE LN				<u> </u>	
LYNN HA		l			* 5.7		The second						
						84		TAMA	CITY	······································	FL	85 Zip (	Code O4
11. Pursuant office or r	to the provision	ns of Sections 617.0502 nt, or both, in the State of , and accept the obliga	and 617.1508, of Florida, Such	Florida Statu change was	tes, the a	boy d by	e-named y the corp	corporation	ation submits thi	is statement for the potentials. I hereby accept			
SIGNATURE	lame	s hi Chushu	n :	James	M	٠   ر	I nok	$D\alpha_{i}$	uphin	Preside	4	1/22	97
12.	Signature, typed or	printed name of registrired agen OFFICERS AND		e. (NO	13.		ent signature	required v	when reinstating) ADDITIONS/	CHANGES TO OFFIC		D DIRECTOR	S IN 12
TITLE	PD	0111021107110		DELETE	1.1 1		1	PRE	SIDENT D	<del></del>		X Change	Addition
NAME	GEORGE I	MCADAMS			1.2 N	AME	}	, ,	DON DAUPI				
STREET ADDRESS	2212 WAS	HINGTON STREET			1.3 9	TREE			8 PRIMROS				
CITY-ST-ZIP	LYNN HAD	<u>EN FL 32444</u>	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.4 (	HY-S	ST-ZIP			FL 32404			
TITLE	VD			DELETE	2.11	FITLE			•	•		Change	Addition
NAME	WRIGHT, .				2.2 8	AME							
STREET ADDRESS	307 FLOYI	•					F ADDRESS			* **			
CITY-ST-ZIP	STD STD	EN FL 32444	,	DELETE		CITY- TITLE	ST-ZIP	CTO	DDT ADV./m	DT 4.0***		X Change	Addition
TITLE NAME	DAUPHIN,	MILDON		DILLET.		NAME			RETARY/TI			LZ3 Onenge	- Fadamon
STREET ADDRESS		IROSE LANE					T ADDRESS	.,	IS MCCAR				i
CITY-ST-ZIP	PANAMA (						ST-ZIP		7 TREE FA				
TITLE	774444	<u> </u>		DELETE		ITLE	VI-E#	PAN	AMA CITY	, FL 32404		Change	Addition
NAME	]				4. 2	NAME	. )						
STREET ADDRESS					4.3 \$	STREET	T ADDRESS						
CITY-ST-ZIP					4,4 (	jTY-	ST-ZIP						
TITLE				DELETE	5.11	TITLE						Change	Addition
NAME					5.21	MAME	j						
STREET ADDRESS							T ADDRESS						
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TITLE				T DECEIG	- 1	MTLE						☐ Change	LJ AQUIDDIS
NAME						MAME MAME							
STREET ADDRESS	1				6.3 3	SINEE	T ADDRESS						

14. I do 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 Annual report or supplemental annual 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 12 or Block/13 if changed, or on an attachment with an address.