

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 21 AM 9:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 790808 (0)

1. Corporation Name

SANTA ROSA COUNTY FARM BUREAU, LAA

Principal Place of Business

Mailing Address

800 E FIRST AVENUE
P.O. BOX 480
JAY FL 32565

800 E FIRST AVENUE
P.O. BOX 480
JAY FL 32565

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/12/1967

3a. Date of Last Report

05/01/1994

4. FEI Number

59-0785943

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 4035 Hwy 4

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

23 Jay FL

28 City & State

28 Jay FL

24 Zip

24 32565

25 Country

25 Santa Rosa

26 Zip

26 Jay FL

27 Country

27 FL

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIAMOND, J. M
2517 CAMORS RD. CAMORS RD
JAY FL 32565

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
DT	NOWLING, SHONNA	P. O. BOX 637 N/A	JAY FL
D	WENDELL, THOMAS	6253 TALL PINES RD.	JAY FL
D	NOWLING, TIM	P. O. BOX 637 N/A	JAY FL
SD	DIAMOND, TAMMY	2517 CAMORS RD.	JAY FL
VO	EDWARDS, ALAN	ROUTE 2 BOX 386	JAY FL
DP	MICKEY, DIAMOND	2517 CAMORS RD.	JAY FL

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
	Vicki Laney	P.O. Box 155 - Hwy 197	Jay, FL 32565	☒	☐
	Tim Laney	P.O. Box 155 - Hwy 197	Jay, FL 32565	☒	☐
	Jerry Davis	Box 97 - Hwy 89	Milton, FL 32570	☒	☐
	Marion Tidwell	8093 Ohomuckla Hwy	Milton, FL 32571	☒	☐
	H H Lowry III	3201 Hazel Avenue Rd	Jay, FL 32565	☒	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mickey Diamond

4/4/95 9046754572

PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING THE FORM. IF YOU NEED ASSISTANCE, PLEASE CALL THE ANNUAL REPORT SECTION AT (904) 487-6056.

FILING FEE \$130.00

**ANNUAL REPORT \$61.25 + \$68.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE**

Reminder:

1. Changes in addresses, officers and registered agent must be typed or printed in ink and legible.
2. Include information in Blocks 3 and 4 if not preprinted by the computer.
3. Signature of the proper officer or director as noted in instructions for Block 14.
4. Indicate liability for intangible tax under s. 199.032, Florida Statutes, in Block 8.
5. Submit with total amount due in the form of a separate check for each filing. (Payable in United States Funds through a United States Bank to Department of State.) Fee is \$130.00.

- Block 1. Block 1 is preprinted with the corporation's name, document number, mailing address and principal place of business as previously reported to our office. The name of corporation cannot be changed by way of this annual report.
- Block 2. Enter the principal place of business if different from the mailing address, or if it has been changed from what was previously reported, in Block 2.
- Block 2a. If the computer-entered mailing address in Block 1 is incorrect, enter the new mailing address in Block 2a. A Post Office Box is acceptable.
- Block 3. Enter the date of incorporation or qualification with this office if Block 3 is blank.
- Block 3a. Enter the file date of the last filed annual report, if applicable.
- Block 4. Complete Block 4 by entering your Federal Employer Identification (FEI) number or checking in the appropriate box. If "applied for" is preprinted in Block 4, you must now provide the FEI number. For assistance with FEI numbers, call IRS at 1-800-829-1040.
- Block 5. Should you desire a certificate reflecting your corporation's status after the filing of this report, check the BOX in Block 5 and include an additional \$8.75 with your filing fee.
- Block 6. Florida law allows for a voluntary conf and members of the Cabinet. If you v
- Block 7. If this corporation is a non-profit cor is not subject to the \$68.75 supplen corporation fee. Please direct all que
- Block 8. Check the appropriate box. Please di
- Block 9. The law requires that each corporati in Block 10. There is no additional fe
- Block 10. Enter name of new Registered Agent THE CORPORATION CANNOT BE IT:
- Block 11. The new registered agent must indic signing in Block 11. No signature is their position with the corporation. I
- Block 12. Block 12 contains the last Informati block 13. If there is no change in th
- Block 13. Block 13 is for changes or additions title line: P=President; V=Vice Pres. positions, e.g., S/D; V/S; V/T/D. A N or "T" MUST BE PLACED BY THE NAME OF EACH OFFICER/DIRECTOR. If the director's address is confidential pursuant to Section 119.07(k), Florida Statutes, an alternate address must be provided. Officers/Directors must list street addresses. If there is no street address, enter the mailing address and "N/A".
- Block 14. This report must be signed in Block 14 with an original signature by either the President, Vice President, Secretary, Treasurer or Director of the Corporation that is listed in Block 12, Block 13 if a change, or on an attachment with a street address. If the corporation is in the hands of a receiver, it must be signed by the trustee or receiver. A signature placed on an attachment in lieu of placement in Block 14 is unacceptable.



APPROVED
AND
FILED

Vicki. Every doesn't
have ST address

SECRETARY OF STATE
JERRY A. HASSEY, FLORIDA
have ST address

"THANKS FOR STICKING WITH US!"

impaigns for the offices of the Governor

ease check the box. The corporation
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ncorrect, enter the correct information

OT acceptable for service of process.

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oration, the person signing must state

rections or additions are to be made in

Use the following type symbols on the
holds more than one position, enter all
1 STREET ADDRESSES. THE LETTER "D"
IF AGE OR OLDER. NOTE: If officer or

**Send only 1995 Preprinted Annual Reports
with stub and check to:**

Division of Corporations
Annual Reports
Post Office Box 1500
Tallahassee, Florida 32302-1500
Phone Number: (904) 487-6056

Send all other filings and correspondence to this address:

Annual Reports Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314
Street Address (Overnight Delivery):
409 East Gaines Street
Tallahassee, Florida 32399

INFORMATION REGARDING RETURNED CHECK

If the check submitted with this report is returned by a bank for any reason, the report will be cancelled and considered not filed. The Department of State will administratively dissolve the corporation if a replacement payment with service charge and annual report are not resubmitted within the prescribed time frame.