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**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

OCHMENT #

101

SANTA	A ROSA COUNTY FARM BU	BREAU, LAA						
Principal Place 4035 HWY 4	e of Business	Mailing Address		<del></del>		iel iéli eléli	8)8)) Blait Bibli	<b>                                    </b>
P.O. BOX 490 JAY FL 32565		PO BOX 490 JAX FL 32565-0490						
US		US			3. Date incorporated or Qualified 06/12/1967	3a. (	Date of Last F 04/05/1	Report <b>996</b>
<ol> <li>Principal P</li> </ol>	lace of Business	2a. Mailing Address 26		<del></del>	4. FEI Number 59-0765943		<b></b>	pplied For of Applicable
Suite, Apt.	#, e(C.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional
City & State	e	City & State	<del></del>		6 Floation Committee Floating			leguired
3		28			6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zíp	Country		8. This corporation has liability for	intangibl	e tax under s	
<u> </u>	25   9. Name and Address of Curren	29	30		Fiorida Statutes  10. Name and Address of New R	Yes		
	b. Hallio and Hadres of Carlon	it trogretoro Agosti	81 N	lame	IV. Hame and Address of New I	ogistered	Agent	<del></del>
DIAMON	ID, J. M		82 8	treet Addre	ess (P.O. Box Number is Not Accepte	shlo\		<del></del>
2517 CAAMORS RD.			<u> </u>	ALOBE AGGIE	ess (1.0. box Number is Not Accepts	aule)		
JAY FL	32565		83					
			<b>64</b> C	lity		FI	85 Zip	Code
11. Pursuant (	to the provisions of Sections 617.050	2 and 617.1508. Florida Statu	tes, the above-na	amed corp	oration submits this statement for the	DUITOOSE (	of changing i	ite registerer
office or re	egistered agent, or both, in the State	of Florida. Such change was	authorized by th	a nornavati	on's board of disasters. I haraby some	na ant tra	pointment as	registered
		ations of Section 617.05026 F	lorida Statutes	o corporati	ons board or directors. Thereby acce	opin into ap	p-+	1091010100
	Slune 1	Ations of, Section 617.0502 F			oration submits this statement for the on's board of directors. I hereby acce			2 10 g/o(0100
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information indicated on this annual port or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under on a man officer or director state-dompton the receipt of the companies of the receipt of the post of the companies of the receipt of the post of the receipt of the