

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790808

FILED
Mar 10, 2009
Secretary of State

Entity Name: SANTA ROSA COUNTY FARM BUREAU, LAA

Current Principal Place of Business:

4035 HWY 4
JAY, FL 32565 US

New Principal Place of Business:

Current Mailing Address:

PO BOX490
JAX, FL 32565 US

New Mailing Address:

FEI Number: 59-0785943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, JERRY
10470 HWY 87 N.
MILTON, FL 32570 US

Name and Address of New Registered Agent:

DAVIS, JERRY
4035 HWY 4
JAY, FL 32565 US

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.

SIGNATURE:

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FLINN, AUDRA
Address: 640 JIMMY LEWIS ROAD
City-St-Zip: MILTON, FL 32570

Title: D () Delete
Name: FLINN, SHANNON
Address: 640 JIMMY LEWIS ROAD
City-St-Zip: MILTON, FL 32570

Title: P () Delete
Name: DAVIS, JERRY
Address: RT 3 BOX 97 HWY 89 N/A
City-St-Zip: MILTOB, FL

Title: DS () Delete
Name: GODWIN, BRUCE
Address: P.O. BOX 184
City-St-Zip: JAY, FL 32565

Title: D () Delete
Name: LOWRY, H H III
Address: 3701 HAZEL GODWIN RD
City-St-Zip: JAY, FL

Title: DT () Delete
Name: DIAMOND, MICKEY
Address: 2517 CAMORS ROAD
City-St-Zip: JAY, FL 32565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: DAVIS, JERRY
Address: 4035 HWY 4
City-St-Zip: JAY, FL 32565

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LOWRY, H H III
Address: 3701 HAZEL GODWIN RD
City-St-Zip: JAY, FL 32565

Title: DT (X) Change () Addition
Name: DIAMOND, MICKEY
Address: 12760 CHUMUCKLA HWY
City-St-Zip: JAY, FL 32565

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRY H DAVIS

PRES

03/10/2009

Electronic Signature of Signing Officer or Director

Date