2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2011
Secretary of State

DOCUMENT# 790819

Entity Name: OSCEOLA COUNTY FARM BUREAU LAA

Current Principal Place of Business:

1680 EAST IRLO BRONSON MCM. HIGHWAY
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

1680 EAST IRLO BRONSON MCM. HIGHWAY
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 59-1140157 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARBIN, HERB
4455 KAISER AVE
ST. CLOUD, FL 32772 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: WOOD, STACEY
Address: 2902 ALBERT RD
City-St-Zip: OKEECHOBEE, FL 34972

Title: D
Name: BRACK, W.J.
Address: 2509 ZUNI RD
City-St-Zip: SAINT CLOUD, FL 34771

Title: P
Name: HARBIN, HERB
Address: 4455 KAISER AVE
City-St-Zip: SAINT CLOUD, FL 34772

Title: S/T
Name: BATEMAN, RANDY
Address: 3600 HARBOR RD
City-St-Zip: KISSIMMEE, FL 34746

Title: D
Name: OXFORD, DEWAYNE
Address: 13754 DESERET LN
City-St-Zip: SAINT CLOUD, FL 34773

Title: D
Name: HUTCHCRAFT, SID
Address: 2688 GROVEVIEW DR
City-St-Zip: WINTER GARDEN, FL 34787

I hereby 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 all other like empowered.

SIGNATURE: HERB HARBIN PRES 02/10/2011

Electronic Signature of Signing Officer or Director Date