2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2005 8:00 am
Secretary of State
02-25-2005 90148 024 ****70.00

DOCUMENT # 790858

1. Entity Name
FLAGLER COUNTY FARM BUREAU LAA

DOUUU701

Principal Place of Business	Mailing Address
1 ENTERPRISE DR A-3 BUNNELL, FL 32110 US	1 ENTERPRISE DR A-3 BUNNELL, FL 32110 US

02052005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-6177723 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COWART, CHUCK RT 1 BOX 1961 BUNNELL, FL 32110	Name Street Address (P.O. Box Number is Not Acceptable) 911 Address change 11361 Cty Rd 305 City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST Secretary-Treas JOHNSON, CHIP RT 1 BOX 84 BUNNELL, FL 32110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	911 Address chg 7447 Hwy 100 Bunnell FL 32110	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Vice President BERTHA, SAM, JR. P.O. BOX 251 N/A BUNNELL, FL 32110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Physical Address 709 N Bacher St Bunnell FL 32110	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P. President COWART, CHUCK RT 1 BOX 1961 BUNNELL, FL 32110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	911 Address Chg 11361 Cty Rd 305 Bunnell FL 32110	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BD Board mem ROBERTSON, STAN RT 1 BOX 95 BUNNELL, FL 32110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	911 Address Chg 137 WATER OAK Rd Bunnell FL 32110	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BD Board Member Matt Seay PO BOX 1151 Bunnell FL 32110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Physical Address 1970 Cty Rd 302 Bunnell FL 32110	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BD Shannon Strickland P.O BOX 1998 BUNNELL FL 32110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Physical Address 1771 Cty Rd 304 Bunnell FL 32110	☐ Change ☒ Addition

Board Members

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles H. Cowart Charles H Cowart 2-7-05 386 447-5282
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #