## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 27 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

790902

(1)

## CALHOUN COUNTY FARM BUREAU, LAA

Site N Mann STREET BLOUNTSTOWN FL 32424  8. Date Incorporated or Qualified 07 Q2/19/1965  3. Date Incorporated or Qualified 02/19/1965  3. Date Incorporated or Qualified 03/15/1996  3. Date Incorporated or Qualified 02/19/1965  3. Date Incorporated or Qualified 02/19/1965  3. Date Incorporated or Qualified 03/15/1996  3. Date Incorporated or Qualified 02/19/1965  3. Date Incorporated or Qualified 03/15/1996  3. Date Incorporated or Qualified 03/15/1996  3. Date Incorporated or Qualified 07/1996  3. Date Incorporated	Principal Place	e of Business	Mailing Address					
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   26   Not. Applied For   Not. Applied	615 N MAIN STREET 615 N MAIN STREET			735				
Sulfe, Apt #, etc.    20								
Solite, ADI P. etc.   202   27   27   27   27   27   27   2	2. Principal Pi	lace of Business	—				<del> </del>	
City & State    City & State    City & State    Country   Zip   Country   Added to Fees   State   Zip   State   Zip   Country   St. Division   Added to Fees   Added to Fees   State   Zip   State   Zip   Country   St. Division   Zip   Added to Fees   State   Zip   Zip   State   Zip		#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7 7 7 1	
Section   Sect	City & State	е	<b>├</b> ┐ '			, -		
BODIFORD JR., CECIL RT 2 BOX 33 HWY 71N ALTHA FL 32421  82 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, 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 Stoch change was authorized by the corporation's board of directors. Injury of scope the exportation as registered office or registered agent, or both, in the State of Florida Stoch change was authorized by the corporation's board of directors. Injury of scope the exportation as registered office or registered agent, and the applications of Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and the applications of Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and the applications of Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and the purpose of changing its registered by the corporation of the sportage and submits as registered.  12.		├ <del></del> ¬ ´	<del> </del>	<b>├</b> ─	ry			r s. 199.032,
BOOFORD JR, CECIL RT 2 BOX 33 HWY 71N ALTHA FL 32421  82 Street Address (P.O. Box Number is Not Acceptable)  83		9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
### 12 BOX 33 HWY 71N ### ALTHA FL 32421  ### City				6	11 Name	•		
ALTHA FL 32421    63				6	2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
### City   FL   88   Zip Code				L		······································		
11. Pursuant to the provisions of Sections 617 0502 and 617 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 perplay accept the appointment as registered agent and marinal with, and accept the obligations of Section 617.0503, Picting Statutes.  SIGNATURE  Sprature, lyeid or yearen name of registered agent and tise 1 applicable (nOTE Registered Agent symptome required Agent symptome required Agent agent and tise 1 applicable (nOTE Registered Agent symptome required Agent agent are required agent and tise 1 applicable (nOTE Registered Agent symptome required Agent agent are required agent agent agent are required by the corporation's board of directors. I perplay accept the epipolishered agent agent agent agent are required by the corporation's board of directors. I perplay accept the epipolishered agent agent agent agent agent agent are required by the corporation's board of directors. I perplay accept the epipolishered agent a	altha f	L 32421		{	[3]			
11. Pussant to the provisions of Sections 617 (502) and 617 (1508, Floridas Statutus, the above-named corporation submits this statement for the purposes of changing its registered agent. I not obth, in the State of Floridas Subtovinced 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 617,0503, Floridas Statutes.    SIGNATURE				<b>E</b>	4 City	· · · · · · · · · · · · · · · · · · ·	85 Z	ip Code
office or registrered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I have by accept the appointment as registered agent and malamilar with, and accept the obligations of Sociotion 617.0503, Florida Statutes.  SIGNATURE  Signature. Sprind or printed name of impointment and title in applicable. (NOTE Required Agent signature required by Chapter agent signature required by Chapter agent agent required by Chapter agent required by Chapter agent required by Chapter 617, Forica Statutes, and that my name			00 1017 1500 5: : 1 0:					- 12
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