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Jun 18 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 790903 (9)

1. Corporation Name

TAYLOR COUNTY FARM BUREAU, LAA



Principal Place of Business

Mailing Address

813 S. WASHINGTON ST.
PERRY FL 32347
US

813 S. WASHINGTON STREET
PERRY FL 32347-3339

3. Date Incorporated or Qualified
10/10/1931

3a. Date of Last Report
04/30/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-6194985

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MALCOLM V. PAGE
RT 5 BOX 570
PERRY FL 32347

81 Name

Henry DAVIS

82 Street Address (P.O. Box Number is Not Acceptable)

1100 EAST JULIA DRIVE

83

84 City

Perry

FL

85 Zip Code
32347

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 hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE V
NAME DAVIS, HENRY
STREET ADDRESS 1100 E. JULIA DRIVE
CITY-ST-ZIP PERRY, FL 00000

1.1 TITLE President
1.2 NAME DAVIS, Henry
1.3 STREET ADDRESS 1100 E. Julia Drive
1.4 CITY-ST-ZIP PERRY FL 32347

TITLE D
NAME REGISTER, JERRY
STREET ADDRESS RT 2, BOX 3 A
CITY-ST-ZIP PERRY, FL 0

2.1 TITLE Director
2.2 NAME Rowell, Auley
2.3 STREET ADDRESS IRA Smith Road Hwy 14
2.4 CITY-ST-ZIP Shady Grove FL 32357

TITLE D
NAME PARKER, RUDOLPH
STREET ADDRESS RT 4 BOX 275
CITY-ST-ZIP PERRY FL

3.1 TITLE Director
3.2 NAME Hardin Thad
3.3 STREET ADDRESS Hwy 19 South Fish Creek Grade
3.4 CITY-ST-ZIP Salem, FL 32356

TITLE P
NAME HOUCK, HELEN
STREET ADDRESS RT 3 BOX 464
CITY-ST-ZIP PERRY, FL 0

4.1 TITLE Director
4.2 NAME Houck, Helen
4.3 STREET ADDRESS Rt. 3, Box 464
4.4 CITY-ST-ZIP PERRY, FL 32347

TITLE ST
NAME HOUCK ERNEST
STREET ADDRESS RT 3 BOX 464
CITY-ST-ZIP PERRY, FL 0

5.1 TITLE Director
5.2 NAME HOUCK, ERNEST
5.3 STREET ADDRESS RT. 3, Box 464
5.4 CITY-ST-ZIP PERRY FL 32347

TITLE D
NAME IMA, RICHARD
STREET ADDRESS RT 5 BOX 612
CITY-ST-ZIP PERRY FL

6.1 TITLE Secretary
6.2 NAME Richard, IMA
6.3 STREET ADDRESS RT. 5, Box 612
6.4 CITY-ST-ZIP PERRY FL 32347

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)

Change

~~Change~~
Vice President
Page, Malcolm V.
Rt. 5, BOX 570
Perry, FL 32347

Add

Director
Sheffield, James P.
Rt. 4, BOX 850
Perry FL 32347