## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # 790903



**FILED** Mar 27, 2006 8:00 am Secretary of State

1. Entity Name TAYLOR COUNTY FARM BUREAU, LAA						03-27-2006	90262 03.	<i>3</i> 0.	1.23			
813 S. WASHINGTON ST. 813		Mailing Address 813 S. WASHINGTON S' PERRY, FL 32347	TREET .		er og skallen	8111 BREIN 18551 82728 (1	i cai em Fis	en en el	NI ÎN EN CÎNUI			
2. Principal Place of Business 3. N		3. Mailing Address	Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02272006	Chg-NP	CR2E037	(11/05)				
City & State		City & State			4. FEI Number 59-6194985				plied For t Applicable			
Zip	Country	Zip	Country		5. Certificate o	f Status Desired		8.75 Add se Require				
6. Name and Address of Current Registered Agent					7. Name and A	Address of New I	Registered Ag	jent				
ROWELL, AULEY				Name								
IRA SMITH ROAD HWY 14 SHADY GROVE, FL			Street Address		O. Box Number	is Not Acceptab	le)					
			City				FL	Zip Code	e			
The above named entity submits this statement for the purpose of changing its registere				ru ru								
	named entry submits this statement to tions of registered agent.	Fine purpose or changing its	registered office o	r registere	o ageni, or boun	i, in the State of Fi	юпов. Тапата	musr wun,	and accept			
SIGNATURE.	Signature, typed or printed name of registered agent	and the it applicable. (NOTI	E. Registered Agent signs	ture required w	rhen reinstating)		DATE					
B .			Election Campaign Financing     Trust Fund Contribution.					\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
	Filing Fee is \$61.25 Due by May 1, 2006											
10.	Due by May 1, 2006 OFFICERS AND DIF	Trust Fund (		Ц /	Added to Fees		rida Departr	nent of St	tate			
TITLE	Due by May 1, 2006  OFFICERS AND DIF	Trust Fund (	21.	Ц /	Added to Fees	Flo	rida Departr ERS AND DIRE	nent of St	tate			
TITLE NAME	OFFICERS AND DIF PD ROWELL, AULEY	Trust Fund C	TITLE NAME	Ц /	Added to Fees	Flo	rida Departr ERS AND DIRE	CTORS IN	tate			
TITLE NAME STREET ADDRESS	Due by May 1, 2006  OFFICERS AND DIF PD ROWELL, AULEY PO BOX 2	Trust Fund C	T11. TITLE NAME STREET ADDRESS	Ц /	Added to Fees	Flo	rida Departr ERS AND DIRE	CTORS IN	tate			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROWELL, AULEY PO BOX 2 SHADY GROVE, FL 32359	Trust Fund C	TITLE NAME STREET ADDRESS CITY-ST-ZIP	A	Added to Fees	Flo	rida Departr	CTORS IN	I 10 Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Due by May 1, 2006  OFFICERS AND DIF PD ROWELL, AULEY PO BOX 2 SHADY GROVE, FL 32359 TD	Trust Fund C	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	A	Added to Fees	Flo	rida Departi	CTORS IN	tate			
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PD ROWELL, AULEY PO BOX 2 SHADY GROVE, FL 32359	Trust Fund C	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AI Tou	Added to Fees DDITIONS/CHAI	FIONGES TO OFFICE	rida Departi	Change	I 10 Addition			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 addrass, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED MAIRE OF SIGNAG OFFICER OR DIRECTOR