

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790971

FILED  
Apr 25, 2005  
Secretary of State

Entity Name: OKALOOSA COUNTY FARM BUREAU LA

## Current Principal Place of Business:

921 JAMES LEE BLVD  
CRESTVIEW, FL 32536 US

## New Principal Place of Business:

## Current Mailing Address:

921 JAMES LEE BLVD  
CRESTVIEW, FL 32536 US

## New Mailing Address:

FEI Number: 59-0997282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EVERS, ROBERT G  
1054 MELTON RD.  
BAKER, FL 32531 US

## Name and Address of New Registered Agent:

FREE, KEITH  
7303 HIGHWAY 393  
LAUREL HILL, FL 32567 US

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: KEITH FREE

04/25/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: EVERS, ROBERT G  
Address: 1054 MELTON RD.  
City-St-Zip: BAKER, FL 32531

Title: VD ( ) Delete  
Name: FREE, KEITH  
Address: 7303 HIGHWAY 393  
City-St-Zip: LAUREL HILL, FL 32567

Title: STD ( ) Delete  
Name: ROGERS, MORRIS  
Address: 3490 NEW EBERNEZER RD  
City-St-Zip: LAUREL HILL, FL 32567

Title: EMB ( ) Delete  
Name: CROWSON, HAROLD  
Address: 1956 LG RUSSELL RD  
City-St-Zip: BAKER, FL 32531

Title: EBM ( ) Delete  
Name: BOOKER, GARY  
Address: 8228 BEAVER CREEK  
City-St-Zip: BAKER, FL 32531

Title: BMM ( ) Delete  
Name: SENTERFITT, JERRY  
Address: 7305 SENTERFITT RD.  
City-St-Zip: LAUREL HILL, FL 32567

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: FREE, KEITH  
Address: 7303 HIGHWAY 393  
City-St-Zip: LAUREL HILL, FL 32567

Title: VD (X) Change ( ) Addition  
Name: EVERS, GREG G  
Address: 1054 MELTON RD  
City-St-Zip: BAKER, FL 32531

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: KEITH FREE

PD

04/25/2005

Electronic Signature of Signing Officer or Director

Date