2002 UNIFORM BUSINESS REPORT (UBR)

Mar 13, 2002 8:00 am Secretary of State DOCUMENT # **791039** 1. Entity Name 03-13-2002 90074 007 ****61 25 LAFAYETTE COUNTY FARM BUREAU, LAA Principal Place of Business Mailing Address HIGHWAY U.S. 27 EAST HIGHWAY U.S. 27 EAST PO BOX 336 PO BOX 336 MAYO FL 32066 MAYO FL 32066 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1085328 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LAND, RODNEY R HWY, U.S. 27 EAST MAYO FL 32066 City Zip Code FL 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (9/01)TITLE D ☐ Delete TITLE ☐ Change ☐ Addition SHAROLD MORGAN SHAW, BILL NAME NAME RT.2@BOX97 STREET ADDRESS **CR2E037** STREET ADDRESS **RR 2 BOX 1285** MAYO, FL 32066 CITY-ST-ZIP CITY-ST-ZIP MAYO FL 32066 ☐ Delete TITLE Change ☐ Addition TITLE NAME LAND, ROD NAME JASON LAND RT. 2 BOX 1510 STREET ADDRESS STREET ADDRESS RR2, BOX 1510 MAYO, FL 32066 ... CITY-ST-ZIP CITY-ST-ZIP MAYO FL 32066 TITLE ☐ Delete ☐ Change ☐ Addition SCOTT BARRINGTON NAME Bell. Myra NAME RT. 3 BOX 267 STREET ADDRESS RR1, BOX 469 STREET ADDRESS MAYO, FL 32066 CITY-ST-ZIP MAYO FL 32066 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE EVERETT HOWELL NAME HENDRICK, MITZI NAME STREET ADDRESS STREET ADDRESS RR2, BOX 345 RT. 1 BOX 284 CITY-ST-ZIP CITY-ST-ZIP <u>BRANFORD, FL 32008</u> Mayo FL 32066 TITL F ☐ Delete TITLE ☐ Change ☐ Addition KERBY, EVERETT NAME NAME BRACK JACKSON STREET ADDRESS STREET ADDRESS RR 3, BOX 61 RT. 2 BOX 1250 CITY-ST-ZIP CITY-ST-ZIP MAYO FL 32066 MAYO FL 32066 TITLE ☐ Change ☐ Addition TITLE Delete HOWELL, W.M. NAME NAME STREET ADDRESS STREET ADDRESS R.R 1 BOX 286 CITY-ST-ZIP CITY-ST-ZIP BRANFORD FL 32008-9781

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: 🚣

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/02

386-294-1399

Daytime Phone #

FILED