2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2010
Secretary of State

DOCUMENT# N03000007891

Entity Name: FLORIDA ASSOCIATION OF COMMUNITY FARMERS' MARKETS INC.

Current Principal Place of Business:

850 S TAMIAMI TR #525
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

PO BOX 5441
GAINESVILLE, FL 32627

New Mailing Address:

FEI Number: 51-0428195 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PETERS, JEANNETTE
5015 NW 24TH DRIVE
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: MATTHEWS, JOHN E
Address: 850 S. TAMIAMI TRAIL #525
City-St-Zip: SARASOTA, FL 34236 US

Title: VP
Name: WYNER, T A
Address: 8800 OKEECHOBEE RD. #36
City-St-Zip: FORT PIERCE, FL 34945 US

Title: T
Name: MOORE, SANDI
Address: 401 W. MAGNOLIA
City-St-Zip: LEESBURG, FL 34749 US

Title: S
Name: HALL, MITCH
Address: 608 POINSETTIA STREET
City-St-Zip: ST. AUGUSTINE BEACH, FL 32080

Title: D
Name: EGGEMAN, GAIL
Address: PO BOX 1213
City-St-Zip: ST. PETERSBURG, FL 33731

Title: D
Name: EGGEMAN, GAIL
Address: PO BOX 1213
City-St-Zip: ST. PETERSBURG, FL 33731

I hereby 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 all other like empowered.

SIGNATURE: JOHN MATTHEWS P 01/18/2010

Electronic Signature of Signing Officer or Director — Date