N12000011742

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress) .	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
		,
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	<u></u> .
790789		
•		

Office Use Only



100241504181

12/14/12--01021--001 **105.00

SECRETARY OF STATE
TALLAHASSEE, FLORID

MA 12/19/12

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Conversion

For

12 DEC 14 AM ID: 05

Limited Agricultural Association into Florida Not For Profit Corporation

This Certificate of Conversion and <u>attached Articles of Incorporation</u> are submitted to convert the following <u>Limited Agricultural Association into a Florida Not For Profit Corporation</u> in accordance with Sections 604.14 and 617.1809, Florida Statutes.

- 1. The name of the Limited Agricultural Association immediately prior to the filing of this Certificate of Conversion is <u>Hillsborough County Farm Bureau</u>, <u>LAA</u>.
- 2. The Limited Agricultural Association was initially formed under ss.604.09-604.14, Florida Statues, on **October 1, 1958**.
- 3. The name of the Florida Profit Not For Profit Corporation as set forth in the <u>attached</u> <u>Articles of Incorporation</u> is <u>Hillsborough County Farm Bureau</u>, <u>Inc</u>.

4. FEI/EIN Number: 590730009 Email Address: hcfb@tampabay.rr.com
5. If not effective on the date of filing, enter the effective date:
Signed this 5 day of DELEMBEK, 2012
Required Signature for Florida Not For Profit Corporation: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. Signature of Incorporator:
Printed Name: DANIEL T. APRILE Title: President
Signature(s) of all person(s) required by Limited Agricultural Association's Articles of Association or Bylaws:
Signature: Daniel april
Drived Names DALLEY T APPLIE
Address: 8910 HIDDEN ISLAND LN. TEMPLE TERRACE, FL 33617
Title: President
Printed Name: William Burnette To
Address: 13990 MLK BLUD, DOUGR, FL 33527
Address. [0]//0 1/16/1 100000, 16 0000/

Man In Heart
Signature:
Printed Name: TM MARTY THAT SEMY W. HINTON
Address: 1610 S. TAYLOR RD. BRANDON, FL 33510
Title: Secretary
Signature: Hunge of Change
Printed Name: GEORGE COLEMAN
Address:35/5 KELL FARMS RD DOUGR FL 33527
Title: Treasurer
Title. Treasurer
Signature: Signature:
Printed Name: James Dyer
Address: 6501 staffold Torrace Plant City 33565
Title: Director
Ciamatruma.
Signature: TM TAHHER Printed Name: TM TAHHER
Address: 6611 HAPTEX DR LKCD FL, 83813
Title: Director
Title: Director
Signature: Lenn Darker
Printed Name: Kenneth Parker
Address: 3411 N. Wilder Rd. Plant City, Fl. 33565
Title: Director
Signature: (Ay E Wood)
Printed Name: RAYE WOOD Address: 3812 STANLEY RD - PLANT CITY, FT 33565
Address: 3812 Stauley Rb - Plant City, F7 33585 Title: Director
Signature: July Such
Printed Names R. FRAKOWING
Address: 3201 E. Williams ROID, PLANT CITY, K 33565
Title: Director
Signature: amanda Callins
Printed Name: AMANDA COLLINS
Address: 4706 CORK RD PLANT CITY, FL 33565
Title: Director
Signature: Daws
Printed Name: ROY OUAUIS
Address: 3816 MCINTOSH RD DOULK, FL 33527
Title: Director

Signature: Non W mult
Printed Name: DAVID DRAWDY
Address: 1501 WILLIAMS RD. PLANT CUTY, 1-L 33565
Title: Director
Ciamatura. Meta X obaca
Signature: Man STE For a Man Ton and Control of the
Printed Name: STEFAN KATSARAS Address: PD BOX L PIANT CIFY, FL 33564
Title: Director
Signature: Dry Johnan
Printed Name: GBFG FHMAN
Address: 4616 BLOOMING DALE AUE. DALRICO, FL 33594
Title: Director
Thic. Birector
Signature: /wol N.
Printed Namer JAKE KABUKN
Address: 13494 COOPER BD PLANT CITY, FL 33065
Title: Director \rightarrow
a: (Milled Vote)
Signature: West Scale
Printed Name! JAMES TEW
Address: PO BOX 93 KATHLEEN, FL 33849
Title: Director
Signature:
Printed Name: PATRICK THOMAS
Address: 3809 MOTT RD DOUER, 1-L 33527
Title: Director
Signature: William
Printed Name: MICHELLE WILLIAMSON
Address: PD BOX 959 DOVEK, FL 33527
Title: Director
Signature:
Printed Name: JOE KEEL
Address: 3016 SUTTON WOODS PLANT CITY. FL 33566
Title: Director

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S. (Not for Profit) DEC 14 AM ID: 05

ARTICLE I NAME

The name of the corporation shall be **HILLSBOROUGH COUNTY FARM BUREAU, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal Office Address:

Mailing Address, if different, is:

100 South Mulrennan Road

Same

Valrico, FL 33594

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Section 1. To promote, foster and encourage more efficient and progressive agriculture.

<u>Section 2</u>. To enable the farmers and growers of Florida to enjoy the manifold benefits of joint and collective effort.

<u>Section 3</u>. To work for the solution of the problems of the farm, the farm home, and rural community, by the use of recognized advantages of organized action, to the end that those engaged in the various branches of agriculture may have opportunity for happiness and prosperity in their chosen work.

<u>Section 4</u>. To represent, protect and advance the social, economic and educational interests of farmers in Florida.

<u>Section 5</u>. To cooperate with Florida Farm Bureau Federation and through it, with the American Farm Bureau Federation, and with the Agricultural Extension Service in bringing their resources to the farmers of Florida.

<u>Section 6</u>. To do and perform any and all acts and things necessary, proper, convenient or desirable for and to affect the full and complete exercise and enjoyment of any and all of the powers and purposes of the Corporation hereby created.

This Corporation does not contemplate pecuniary gain to the members thereof.

ARTICLE IV DIRECTORS

The property, affairs, business, and operation of the Corporation shall be managed by a Board of Directors, which shall be elected as provided in the Bylaws.

ARTICLE V OFFICERS

The officers of the Board shall consist of a President, a Vice President, a Secretary, a Treasurer, and such other officers as may be elected or appointed. All officers shall be elected or appointed as provided in the Bylaws.

ARTICLE VI INITIAL OFFICERS AND/OR DIRECTORS

The officers who are to conduct the business of the Corporation until their successors are elected and qualified are as follows:

President and Director DANIEL T. APRILE
Address 9910 HIDDEN ISLAND LN.
City, State, Zip TEMPLE TERRACE, FL 33617
Vice President and Director BILL BURNETT (WM. C.) Address 12990 MLK BLUD. DOUGK, FL 33
City, State, Zip DOUER, Pl 33527
Secretary and Director <u>JEMY HINTON</u> Address <u>1610 S. TAYLOR RD</u>
City, State, Zip BRANDOW, FL 33570
Treasurer and Director <u>GEORGE COLEMAN</u> Address <u>35/5 BELL FARMS RD.</u>
City, State, Zip PLANT CITY, FL 33566
Director AMANDA COLLINS Address 4706 COKK RD
City, State, Zip PLANT CITY, FL 33565

1. 0
Director <u>Jim Dyer</u>
Address 6501 stafford Terrace
City, State, Zip Plant City FL 33565
Director MARTY TANNER
Address 6611 HAYTER DR.
City, State, Zip LAIKELAHD FL. 33813
Director Kenneth Parker
Address 3411 N. Wilder Rd.
City, State, Zip Plant City, Fl. 33565
Director Thy E Woos
Address 3812 Starley Rd
City, State, Zip Plant City, F7 33565
Director JAMES R. FRANKOWIAIC
Address 3201 E. Williams Rona
City, State, Zip Plant City, Pa 33575
Director ROY DAUIS
Address 3816 MCINTOSH RD
City, State, Zip DOUER, FL 33527
Director DAUID DRAWDY
Address 1501 WILLAMS BD.
City, State, Zip PLANT CITY, FL 33565
Director STEFAN KATZARAS
Address POBOX L
City, State, Zip PLANT CITY, PL 33524
,
Director GREG LEHMAN
Address 4616 BLOOMING DALE AUE.
City, State, Zip VALRICO, FL 33594

Director SAKE KABUKN
Address 3404 COOPER RD.
City, State, Zip PLANT CITY, FL 33585
Director JAMES TEW
Address POBOX 93
City, State, Zip KATHLEEN, Fl 33849
Director PATRICK THOMAS
Address 3209 MOTT RD
City, State, Zip DOVER, FL 33527
Director MICHELLE WILLIAMSON Address POBOX 959
City, State, Zip DOUEK, R. 33527
Director JOE KEEL
Address 3016 SUTTON WOODS DR.
City, State, Zip PLANT CITY FL 33566

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the Registered Agent is:

Name: Judi D. Whitson

Florida Street Address:

100 South Mulrennan Road

Valrico, FL 33594

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Daniel T. Aprile

Florida Street Address:

100 South Mulrennan Road

Valrico, FL 33594

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Required Signature of Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature of Incorporator

Date