

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32416

FILED
Feb 07, 2009
Secretary of State

Entity Name: TALLAHASSEE RETAIL FARMERS MARKET AGRICULTURAL COOPERATIVE MARKETING ASSOCIATION, INCORPORATED

Current Principal Place of Business:

MARKET SQUARE
1415 TIMBERLANE ROAD
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

JIMMY MITCHELL
P O BOX 254
CAIRO, GA 39828

New Mailing Address:

FEI Number: 59-3018918 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HENRY, GEORGE C JR.
4229 GEARHART ROAD
TALLAHASSEE, FL 32303 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: VPD () Delete
Name: KIMBLE, HARRIS
Address: RT # BOX 385
City-St-Zip: QUITMAN, GA 31643

Title: DP () Delete
Name: MITCHELL, JAMES L
Address: 1748 GATTINGWAY ST. P.O. BOX 254
City-St-Zip: CAIRO, GA 31728

Title: D () Delete
Name: CORKER, JOHN I
Address: 95 C SWAMP CREEK RD.
City-St-Zip: WHIPHAM, GA 31797

Title: D () Delete
Name: BURKS, JUDY
Address: 205 AZALEA LANE
City-St-Zip: CAIRO, GA 39828

Title: D () Delete
Name: NAIRN, DANIEL
Address: ROUTE 3 BOX 326
City-St-Zip: MOCCESANGEP, FL 32305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PRES (X) Change () Addition
Name: MITCHELL, JIMMY
Address: 1748 GA HWY 111 S P. O. BOX 254
City-St-Zip: CAIRO, GA 39828

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 exemption stated 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 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: JIMMY MITCHELL

PRES

02/07/2009

Electronic Signature of Signing Officer or Director

Date