

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N50530

FILED  
Nov 04, 2014  
Secretary of State

**Entity Name:** THE FLORIDA BLUEBERRY GROWER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

762 EDISON RD  
AUBURNDALE, FL 33823 US

**New Principal Place of Business:**

201 HOWELL AVENUE  
BROOKSVILLE, FL 34601 US

**Current Mailing Address:**

P.O. BOX 646  
BARTOW, FL 33831

**New Mailing Address:**

P.O. BOX 940545  
MAITLAND, FL 32794 US

**FEI Number:** 59-3141319

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRASWELL, WILLIAM  
762 EDISON ROAD  
AUBURNDALE, FL 33823 US

**Name and Address of New Registered Agent:**

MORGAN, LINDSAY  
201 HOWELL AVENUE  
BROOKSVILLE, FL 34601 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: LINDSAY A. MORGAN

11/04/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: CALFEE, DUDLEY  
Address: PO BOX 940545  
City-St-Zip: MAITLAND, FL 32794 US

Title: SEC  
Name: BROTHERS, SHERI  
Address: 285 NW 67TH ST  
City-St-Zip: OCALA, FL 34475 US

Title: TREA  
Name: KOSINSKY, AMBER D  
Address: PO BOX 1839  
City-St-Zip: PLANT CITY, FL 33564 US

Title: VP  
Name: EBBECKE, DANIEL  
Address: PO BOX 940545  
City-St-Zip: MAITLAND, FL 32794 US

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: DUDLEY CALFEE

PRES

11/04/2014

Electronic Signature of Signing Officer or Director

Date