
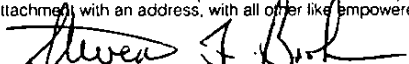


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008 8:00 am
Secretary of State

03-05-2008 90031 036 ****61.25

DOCUMENT # N95000000638 1. Entity Name GILCHRIST COUNTY FFA ALUMNI ASSOCIATION, INC.					
Principal Place of Business 4050 S US HIGHWAY 129 BELL, FL 32619			Mailing Address 1013 N MAIN STREET TRENTON, FL 32693		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent LANCASTER, SHEREE H 109 E WADE ST TRENTON, FL 32693				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> <div style="float: right;">DATE _____</div>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D <input type="checkbox"/> Delete		TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BROWN, HERBIE		NAME	JONES, TOMMY	
STREET ADDRESS	HIGHWAY 129		STREET ADDRESS	HIGHWAY 129	
CITY - ST - ZIP	TRENTON, FL 32693		CITY - ST - ZIP	BELL FL 32619	
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SAYERS, MELISSA		NAME		
STREET ADDRESS	N HIGHWAY 341		STREET ADDRESS		
CITY - ST - ZIP	TRENTON, FL 32693		CITY - ST - ZIP		
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BEACH, JEFFERY		NAME		
STREET ADDRESS	HIGHWAY 307		STREET ADDRESS		
CITY - ST - ZIP	TRENTON, FL 32693		CITY - ST - ZIP		
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LINDSEY, DALE		NAME		
STREET ADDRESS	HIGHWAY 232		STREET ADDRESS		
CITY - ST - ZIP	BELL, FL 32619		CITY - ST - ZIP		
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BEACH, GARRETT		NAME		
STREET ADDRESS	HIGHWAY 307		STREET ADDRESS		
CITY - ST - ZIP	TRENTON, FL 32693		CITY - ST - ZIP		
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BROKER, STEVEN F		NAME		
STREET ADDRESS	9140 SW 15TH CT		STREET ADDRESS		
CITY - ST - ZIP	TRENTON, FL 32693		CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 			STEVEN F. BROKER		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<div style="display: flex; justify-content: space-between;"> <small>Date</small> 3/4/08 <small>Daytime Phone #</small> 352 463 3273 </div>		

40000000



03042008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3291134

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**