

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 29, 2004 8:00 am
Secretary of State

07-29-2004 90013 014 ****61.25

DOCUMENT # N95000004148

1. Entity Name
**SANTA FE SOIL & WATER CONSERVATION DISTRICT,
INC.**



Principal Place of Business
**RIDGECREST PLAZA SUITE 5
3884 S. FIRST ST.
LAKE CITY, FL 32025 US**

Mailing Address
**P.O. BOX 2486
LAKE CITY, FL 32056**

44050487



2. Principal Place of Business

USDA Service Center

3. Mailing Address

Suite, Apt. #, etc.

1304 SW MAIN BLVD

Suite, Apt. #, etc.

City & State
Lake City FL

City & State

Zip
32025

Country

Zip

Country

07012004 Chg-NP

CR2E037 (10/03)

4. FEI Number

59-3081780

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BROWN, WILL
870 FAMU LANE
LAKE CITY, FL 32055**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Will J. Brown

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

July 14, 04

DATE

**Filing Fee is \$61.25
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
BROWN, WILL J
870 FAMU LANE
LAKE CITY, FL 32055**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
OGDEN, RUFUS
P.O. BOX 603
WELLBORN, FL 32094**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MOSELEY, LAMAR
RT 3 BOX 3812
FORT WHITE, FL 32038**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SPRADLEY, DON
RT. 16 BOX 658
LAKE CITY, FL 32055**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Don Stevens
Rt. 27 Box 901
Lake City FL 32024**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1038 S.W. County Rd 18

☒ Change

☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Will J. Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 14, 04

Date

(386) 752-8447

Daytime Phone #