

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

007585

DOCUMENT # N95000005364

1. Entity Name

THE AGRICULTURE FACILITIES ADMINISTRATION AND MANAGEMENT CORPORATION



APPROVED
AND
FILED

03 APR -2 AM 3:50

Principal Place of Business

12 NORTH ELM STREET
FELLSMERE FL 32948
US

Mailing Address

PO BOX 279
FELLSMERE FL 32948

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

10 N. Cypress St

3. Mailing Address

Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State

Fellsmere FL

City & State

4. FEI Number 31-1471942

Applied For

Not Applicable

Zip

32948

Country

USA

Zip

Country

US

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOORE, TOM R
310 BLOUNT STREET
SUITE 116
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name JACKSON, TODD T.

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

10 N. Cypress St

City Fellsmere

FL

Zip Code 32948

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

Todd T. Jackson

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

(NOTE: Registered Agent signature required when reinstating)

Todd T. Jackson, Secretary 03-31-03

DATE

FILE NOW: FEE IS \$61.25

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 PD
NAME ADAMS, TOM B ☐ Delete
STREET ADDRESS 11550 C.R. 507
CITY-ST-ZIP FELLSMERE FL 32948

TITLE D
NAME HART, W.C. ☐ Delete
STREET ADDRESS RT 3 BOX 14
CITY-ST-ZIP MAYO FL 32066

TITLE TD
NAME RING, STEVE ☐ Delete
STREET ADDRESS 12 NORTH ELM STREET
CITY-ST-ZIP FELLSMERE FL 32948

TITLE D
NAME NORDSTEDT, ROGER A ☐ Delete
STREET ADDRESS 103 FRAZIER ROGERS HALL
CITY-ST-ZIP GAINESVILLE FL 32611-0550

TITLE SD
NAME JACKSON, TODD T ☐ Delete
STREET ADDRESS 1290 BONAVENTURE DRIVE
CITY-ST-ZIP MELBOURNE FL 32940

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME Adams, Tom B
STREET ADDRESS 10 N. Cypress St
CITY-ST-ZIP Fellsmere, FL 32948

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☒ Change ☐ Addition
NAME Ring, Steve
STREET ADDRESS 10 N. Cypress St.
CITY-ST-ZIP Fellsmere, FL 32948

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
900018577639
05/09/03--01005--005 **70.00

TITLE SD ☒ Change ☐ Addition
NAME Jackson, Todd T.
STREET ADDRESS 10 N. Cypress St
CITY-ST-ZIP Fellsmere, FL 32948

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 address, with all other like empowered.

SIGNATURE *Todd T. Jackson* Pres 3-31-03 772-51-0577

CR2E037 (10/02)