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

[redacted]
07-23-2003 90054 004 ****61.25

FILED N95000005364

DOCUMENT # N95000005364

1. Entity Name
The Agriculture Facilities Administration and Management Corporation

03 AUG -4 AM 8:15

SECRETARY OF STATE
TALLAHASSEE FLORIDA
900145843

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
10 N. Cypress Street	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Fellsmere FL	City & State
Zip: 32948 Country: USA	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 31-1471942 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Todd T. Jackson

Street Address (P.O. Box Number is Not Acceptable): 10 N. Cypress Street

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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FEE IS $61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	TITLE	
NAME	Frank Margiotta	NAME	
STREET ADDRESS	10 N. Cypress Street	STREET ADDRESS	
CITY-ST-ZIP	Fellsmere, FL 32948	CITY-ST-ZIP	
TITLE	SD	TITLE	
NAME	Todd Jackson	NAME	
STREET ADDRESS	10 N. Cypress Street	STREET ADDRESS	
CITY-ST-ZIP	Fellsmere, FL 32948	CITY-ST-ZIP	
TITLE	TD	TITLE	
NAME	Steve Ring	NAME	
STREET ADDRESS	10 N. Cypress Street	STREET ADDRESS	
CITY-ST-ZIP	Fellsmere, FL 32948	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	W. C. Hart	NAME	
STREET ADDRESS	Rt 3 Box 14	STREET ADDRESS	
CITY-ST-ZIP	Mayo, FL 32066	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	Roger Nordstedt	NAME	
STREET ADDRESS	103 Frazier Rogers Hall	STREET ADDRESS	
CITY-ST-ZIP	Gainesville, FL 32611-0550	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	Terry Hurst	NAME	
STREET ADDRESS	P.O. Box 165	STREET ADDRESS	
CITY-ST-ZIP	Oxford, FL 34484-0165	CITY-ST-ZIP	

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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 7-21-03 (772)571-0577
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment 90145843
#119500005304

Agriculture Facilities Administration & Management Corporation

Additional Directors:

D
Gary Rodrick
P.O. Box 110370
Gainesville, FL 32611-0370

D
Robert Bradford
305 Perry-Paige Building
Tallahassee, FL 32307

P.O. Box 279 • Fellsmere, Florida 32948 • Phone 772-571-0577 • Fax 772-571-0576