2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # N9700001265 Apr 03, 2000 8:00 am Secretary of State 1. Entity Name FLORIDA TOBACCO GROWERS ASSOCIATION, INC. 04-03-2000 90201 005 ****61.25 Principal Place of Business Mailing Address 1 S. 53RD STREET 1 S. 53RD STREET MADISON FL 32340 MADISON FL 32340 2. Principal Place of Business 3. Mailing Address 3 ها (لا Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc 4. FEI Number Applied For City & State City & State 59-3523099 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required سككمموو 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Thisher Street Address (P.O. Box Number is Not Acceptable) HOGAN, LINDA 1 S. 53RD STREET 8763 CR asa MADISON FL 32340 City Zip Code Live Oak 2060 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 (NOTE: Registered Agent signature requi printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution, Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition ☐ Change TITLE ☐ Delete TITI F NAME Jon W. Deas NAME Dasher, Kenneth 5854 NIW CR 146 STREET ADDRESS STREET ADDRESS 8763 CR 252 CITY-ST-7IP 32053 CITY-ST-ZIP LIVE OAK FL 32060 Addition Change Delete TITLE TITLE Aldine Fees HURST, CHARLES NAME NAME STREET ADDRESS STREET ADDRESS irt 1 Box 442 CITY-ST-ZIP CITY-ST-ZIP BRANFORD FL 32008 Delete Change Addition TITLE TITLE DEAS, DAMON NAME lamon Deas NAME STREET ADDRESS STREET ADDRESS 5000 NIW 20th Dr. RT 1 BOX 215 CITY-ST-ZIP CITY-ST-ZIP <u>Jennings FL 32053</u> ar UP TITLE ☐ Change Addition Delete TITLE NAME NAME HALE, GUY Jack Flowers STREET ADDRESS STREET ADDRESS 28226 NW CR 241 136世St 20923 CITY-ST-ZIP CITY-ST-ZIP ALACHU<u>A FL</u> 32<u>615</u> ☐ Change X Addition ☐ Delete TITLE TITLE NAME Richard MOORE, CECIL STREET ADDRESS STREET ADDRESS 1 NW IRVIN AVE CITY-ST-ZIP CITY-ST-ZIP 32340 LIVE OAK_FL 32060 TITLE Change Delete TITLE DAVIS, ROGER NAME NAME Ewerzw ke NIW Old Bellamy Rd STREET ADDRESS STREET ADDRESS RT. 12 BOX 57 Paroc CITY-ST-ZIP LAKE CITY FL 32025 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 ampowered. changed, or on an attachment with an address, with all other like empowered.

Ford Brewer
P. O. Box 393
Lake City, FL 32056

Jerry Herring Rt. 3, Box 139 Madison, FL 32340

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Michael D.Adams 6834 N/W 44th. St. Jennings, FL 32053

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-Sylvester Curry 1990 N/W 23rd. Blvd. Jennings, FL 32053

D

Wesley Sache 13050 N/W Hwy. 129 Chiefland, FL 32626

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