

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2007 8:00 am
Secretary of State

04-04-2007 90189 050 *****61.25

DOCUMENT # N97000001740

1. Entity Name

FLORIDA SIMMENTAL SIMBRAH ASSOCIATION, INC.



Principal Place of Business

5314 PEPPER LANE
MARIANNA FL 32448-7340

Mailing Address

5314 PEPPER LANE
MARIANNA FL 32448-7340



2. Principal Place of Business - No P.O. Box #

11935 Backland Path Road

Suite, Apt. #, etc.

Polk City, FL

City & State

33868

Zip

Country

3. Mailing Address

11935 Backland Path Road

Suite, Apt. #, etc.

Polk City, FL

City & State

33868

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-3443506

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUDLEY P. HARDY, P.A.
998 N TEMPLE AVE
STARKE FL 32091

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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 D ☐ Delete
NAME ROWE, BERNON
STREET ADDRESS 784 BRYAN LN
CITY-STATE-ZIP AUBURNDALE FL 33823

TITLE P ☐ Delete
NAME ROWE, ALAN
STREET ADDRESS 1632 PEARCE RD
CITY-STATE-ZIP POLK CITY FL 33868

TITLE ST ☐ Delete
NAME CARTER, CHANLEY
STREET ADDRESS 5314 PEPPER LN
CITY-STATE-ZIP MARIANNA FL 32448

TITLE D ☐ Delete
NAME WILLIAMS, SCOTT
STREET ADDRESS 6711 OLD HWY 37
CITY-STATE-ZIP LAKELAND FL 33811

TITLE VP ☐ Delete
NAME SCOTT, ROBERT
STREET ADDRESS 2805 RWS RANCH RD
CITY-STATE-ZIP DAVENPORT FL 33837

TITLE D ☐ Delete
NAME SHARP, TERRY
STREET ADDRESS 3901 CORK RD
CITY-STATE-ZIP PLANT CITY FL 33565

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☒ Change ☐ Addition
NAME Terri Sharpe
STREET ADDRESS 3901 Cork Road
CITY-STATE-ZIP Plant City, FL 33565

TITLE VP ☒ Change ☐ Addition
NAME Clay Richie
STREET ADDRESS 410 EL Salvador Drive
CITY-STATE-ZIP Lakeland, FL 33809

TITLE ST ☒ Change ☐ Addition
NAME Debbi Wilber
STREET ADDRESS 11935 Backland Path Rd.
CITY-STATE-ZIP Polk City, FL 33868

TITLE D ☒ Change ☐ Addition
NAME Alan Rowe
STREET ADDRESS 1632 Pearce Road
CITY-STATE-ZIP Polk City, FL 33868

TITLE D ☒ Change ☐ Addition
NAME Robert Scott
STREET ADDRESS 2805 RWS Ranch Road
CITY-STATE-ZIP Davenport, FL 33837

TITLE D ☒ Change ☐ Addition
NAME Daniel Sharp
STREET ADDRESS 3901 Cork Road
CITY-STATE-ZIP Plant City, FL 33565

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 I am empowered.

SIGNATURE:

Debbi Wilber / Debbi Wilber - ST

3/24/07 (863)738-0312

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #