2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State
04-26-2006 90192 034 ****61.25

DOCUMENT # N97000001909

1. Entity Name
FARMERS' MARKETING CO-OP, INC.

Principal Place of Business	Mailing Address
681 S MAIN ST LABELLE, FL 33935 US	681 S MAIN ST LABELLE, FL 33935 US

04242006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
3290 CASE RD	3921 FT DENAUD RD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: LABELLE FL	City & State: LABELLE FL
Zip: 33935 Country: HENDRY	Zip: 33935 Country: HENDRY

4. FEI Number: 65-0742388 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

TOLAR, TONY L
~~681 S MAIN ST~~ 3290 CASE RD
LABELLE, FL 33935

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: Ruthann Fraleigh 4/24/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when executed.) DATE

Filing Fee is $61.25
Due by May 1, 2006

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PUTNAL, JACK 19769 152ND STREET LIVE OAK, FL 32060	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BO ALLEN 6796 LANTANA RD #2 LAKE WORTH, FL 33467	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D YARBOROUGH, BLAINE ROUTE 2, BOX 218 PAVO, GA 31778	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PAUL C FRY 2659 CASE RD LABELLE FL 33935	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S FRALEIGH, RUTHANN 3921 FT DENAUD RD LABELLE, FL 33935	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TOLAR, TONY ~~681 S MAIN ST~~ 3290 CASE RD LABELLE, FL 33935	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	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 exemptions contained in Chapter 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 like empowered.

SIGNATURE: Ruthann Fraleigh RUTHANN FRALEIGH 4/24/06 863-675-7497
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #