

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# U00021

FILED
Jun 10, 2011
Secretary of State

Entity Name: BOLL WEEVIL ERADICATION FOUNDATION OF FLORIDA, INC.

Current Principal Place of Business:

3075 HICKORY HOLLOW LANE
JAY, FL 32565

New Principal Place of Business:

Current Mailing Address:

PO BOX 921
JAY, FL 32565

New Mailing Address:

FEI Number: 59-2843812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, LEWIE JOE
3075 HICKORY HOLLOW LANE
JAY, FL 32565 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C
Name: SMITH, LEWIE J
Address: 3075 HICKORY HOLLOW LANE
City-St-Zip: JAY, FL 32565

Title: D
Name: DAVIS, JERRY
Address: 10410 HWY. 87 N.
City-St-Zip: MILTON, FL 32570

Title: D
Name: WARD, BRETT
Address: 4761 HWY 99 A
City-St-Zip: WALNUT HILL, FL 32568

Title: D
Name: DAVIS, MICHAEL
Address: 3900 VICKS RD.
City-St-Zip: GRACEVILLE, FL 32440

Title: D
Name: MELTON, DON
Address: 25410 SHORTY SEGERS RD.
City-St-Zip: ALTHA, FL 32421

Title: D
Name: EDWARDS, ALLEN
Address: 2108 MINERAL SPRINGS ROAD
City-St-Zip: JAY, FL 32565

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LEWIE JOE SMITH

PRES

06/10/2011

Electronic Signature of Signing Officer or Director

Date