## 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 791127** 

Entity Name: FLORIDA STRAWBERRY GROWERS ASSOCIATION

FILED
Jan 28, 2025
Secretary of State
7020092822CC

**Current Principal Place of Business:** 

13138 LEWIS GALLAGHER ROAD DOVER. FL 33527

## **Current Mailing Address:**

P.O. DRAWER 2550 PLANT CITY. FL 33564 US

FEI Number: 59-2252497 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WESTLAKE, ROB 13138 LEWIS GALLAGHER RD DOVER, FL 33527 US

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: ROB WESTLAKE 01/28/2025

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

Title VP Title PRESIDENT

Name REAPE, JOHN Name SIZEMORE, JOHN

Address P.O. DRAWER 2550 Address P.O. DRAWER 2550

City-State-Zip: PLANT CITY FL 33564

City-State-Zip: PLANT CITY FL 33564

Title **SECRETARY** Title **TREASURER** Name RUNKLES, CASEY Name SIZEMORE, JAY Address **P.O. DRAWER 2550** Address **P.O. DRAWER 2550** PLANT CITY FL 33564 City-State-Zip: PLANT CITY FL 33564 City-State-Zip:

Title EXECUTIVE DIRECTOR
Name PARKER, KENNETH
Address P.O. DRAWER 2550
City-State-Zip: PLANT CITY FL 33564

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: KENNETH PARKER

DIRECTOR OF BUSINESS 01/28/2025 AND FINANCE

Electronic Signature of Signing Officer/Director Detail

Date