

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000008377

Entity Name: PINELLAS COUNTY FARM BUREAU, INC.**Current Principal Place of Business:**141 NW MADISON CIR N
ST PETERSBURG, FL 33702**Current Mailing Address:**141NW MADISON CIR N
ST PETERSBURG, FL 33702 US**FEI Number:** 59-0792529**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BOWMAN, JACK
141NW MADISON CIR N
ST PETERSBURG, FL 33702 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:** JACK BOWMAN

02/03/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name WATERS, LESLIE
Address 1165 LAKEVIEW ROAD
City-State-Zip: CLEARWATER FL 33756

Title TREASURER
Name BOWMAN, JACK
Address 141NW MADISON CIR N
City-State-Zip: ST PETERSBURG FL 33702

Title PRESIDENT
Name SINDLINGER, PAMELA
Address 141NW MADISON CIR N
City-State-Zip: ST PETERSBURG FL 33702

Title DIRECTOR
Name BOWERS, ALYSSA
Address 12520ULMERTON RD
City-State-Zip: LARGO FL 33774

Title DIRECTOR
Name BROWN, CAROLINE
Address 2301 TUDOR LANE
City-State-Zip: CLEARWATER FL 33763

Title DIRECTOR
Name HICKMAN, STEPHANIE
Address 6000 150TH AVE N
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR
Name LANE, JIM
Address 9614 TREASURE LANE NE
City-State-Zip: ST PERSBURG FL 33702

Title DIRECTOR
Name ROGALSKY, JEAN
Address 815 JAMES ST
City-State-Zip: DUNEDIN FL 34698

Continues on page 2

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: JACK BOWMAN

TREASURER

02/03/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	STANDLEY, JENNIFER
Address	PO BOX 5641
City-State-Zip:	CLEARWATER FL 33758