2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000010264

Entity Name: OKEECHOBEE COUNTY FARM BUREAU, INC.

FILED
Mar 10, 2022
Secretary of State
6562824953CC

Current Principal Place of Business:

105 NW 5TH STREET. OKEECHOBEE, FL 34972

Current Mailing Address:

105 NW 5TH STREET

OKEECHOBEE, FL 34972 US

FEI Number: 59-1102390 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BANDI, MICHAEL L 105 NW 5TH STREET. OKEECHOBEE, FL 34972 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: MICHAEL L BANDI 03/10/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	PRESIDENT, DIRECTOR	Title	VP, DIRECTOR
Name	BANDI, MICHAEL L	Name	BUTLER, BENJAMIN L
Address	8648 SW 7TH LN	Address	608 BUTLERS BLUFF RD
City-State-Zip:	OKEECHOBEE FL 34974	City-State-Zip:	LORIDA FL 33857

 Title
 SECRETARY, DIRECTOR
 Title
 DIRECTOR

 Name
 HAZELLIEF, DAVID E
 Name
 BUTLER, WILL

Address 1200 S. PARROTT AVE. Address 13605 SW 144TH PKWY

City-State-Zip: OKEECHOBEE FL 34974 City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR Title DIRECTOR

Name DAVIS, COURTNEY Name LARSON, JACOB N

Address 16515 NW 203RD Address PO BOX 2122

City-State-Zip: OKEECHOBEE FL 34972 City-State-Zip: OKEECHOBEE FL 34973

Title DIRECTOR Title DIRECTOR

Name ALTMAN, DAVY Name SMALL, JOHN

Address 8175 SW 9TH ST. Address 30355 US HWY 441N

City-State-Zip: OKEECHOBEE FL 34974 City-State-Zip: OKEECHOBEE FL 34972

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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: MICHAEL L BANDI PRESIDENT 03/10/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title OFFICER/DIRECTOR

Name LOTT, MORGAN

Address 11613 CR 721

City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR

Name RUCKS, GARRETT Address 4797 US HWY 98N

City-State-Zip: OKEECHOBEE FL 34972

Title DIRECTOR

Name WILSON, JOSH

Address 192 JAMES CIR

City-State-Zip: LAKE ALFRED FL 33850

Title DIRECTOR
Name PERRY, LOGAN

Address 511 SE 2ND AVE
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR

Name THOMAS, CHAD
Address 16980 NW 176TH AV

City-State-Zip: OKEECHOBEE FL 34972