2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1700000280

Entity Name: FLORIDA PEANUT FEDERATION, INC.

citity Name. FLORIDA FEANOT FEDERATION, I

Current Principal Place of Business:

17856 US HWY 129 S MCALPIN. FL 32062

Current Mailing Address:

PO BOX 163

MCALPIN. FL 32062 US

FEI Number: 81-5060338 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HERRON, MARK 2618 CENTENNIAL PLACE TALLAHASSEE, FL 32308 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:

Electronic Signature of Registered Agent

Date

FILED Mar 18, 2021

Secretary of State

0802432816CC

Officer/Director Detail:

Title D Title I

Name ADAMS, MIKE Name TILLIS, MURRAY

Address 6193 STATE ROAD 6W Address POST OFFICE BOX 1669
City-State-Zip: JASPER FL 32052 City-State-Zip: CHIEFLAND FL 32644

Title D Title D

Name PHILMAN, KELLY Name TOWNSEND, CLIF

Address 6510 N US HWY 129 Address 5608 CR 249

City-State-Zip: BELL FL 32619 City-State-Zip: LIVE OAK FL 32060

Title VP Title D

NameBARRINGTON, KEVINNameSANCHEZ, HERMAN JR.Address722 SW FREEDOM ROADAddress479 NE 446TH STREETCity-State-Zip:MAYO FL 32066City-State-Zip: OLD TOWN FL 32680

Title PRESIDENT Title SECRETARY, TREASURER

NameSTANSEL, DWIGHTNameGWINN, DONELLAddress5553 164TH STREETAddress17233 99 DRIVECity-State-Zip:WELLBORN FL 32094City-State-Zip:MCALPIN FL 32062

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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: DWIGHT STANSEL PRESIDENT 03/18/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D

Name BELL, ARLENE

Address POST OFFICE BOX 459
City-State-Zip: WILLISON FL 32696