2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790526

Entity Name: FARMERS COOPERATIVE INC.

Current Principal Place of Business:

1841 W. HOWARD ST. LIVE OAK, FL 32064

Current Mailing Address:

PO BOX 610

LIVE OAK, FL 32064 US

FEI Number: 59-0566896 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LONG, BARRY 1841 W. HOWARD ST. LIVE OAK, FL 32064 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: BARRY LONG 02/13/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR MCLEOD, KENNETH LEE, JEFF Name Name

Address PO BOX 610 Address 1841 W. HOWARD ST. City-State-Zip: LIVE OAK FL 32064 City-State-Zip: LIVE OAK FL 32064

Title D Title ST

Name MORGAN, KEVIN M Name LONG, BARRY

Address **PO BOX 610** Address 1841 W HOWARD STREET

LIVE OAK FL 32064 City-State-Zip: City-State-Zip: LIVE OAK FL 32064

Title DIRECTOR Title **DIRECTOR**

Name HAMRICK, JEFFERY CARTE. WILLIAM T Name

Address 1841 W. HOWARD ST. PO BOX 610 Address

P O BOX 610 LIVE OAK FL 32064

City-State-Zip: City-State-Zip: LIVE OAK FL 32064

Title **PRESIDENT** Title VΡ

LYONS, RICKY N Name Name EUBANKS, ARNETT

PO BOX 610 Address Address **PO BOX 610**

City-State-Zip: LIVE OAK FL 32064 City-State-Zip: LIVE OAK FL 32064

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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.

SECRETARY/TREASURER 02/13/2023 SIGNATURE: BARRY LONG

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 13, 2023

Secretary of State

1049294133CC

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name STEICHEN, TIMOTHY Name HENDERSON, TED

Address PO BOX 610 Address PO BOX 610

City-State-Zip: LIVE OAK FL 32064 City-State-Zip: LIVE OAK FL 32064