

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H44617

**Entity Name:** FARMERS AGRICULTURAL SUPPLY CO., INC.

**Current Principal Place of Business:**

5386 EZELL STREET  
GRACEVILLE, FL 32440

**Current Mailing Address:**

5386 EZELL STREET  
GRACEVILLE, FL 32440

**FEI Number: 59-2473681**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MIXSON, JOHN VIRGIL  
5386 EZELL STREET  
GRACEVILLE, FL 32440 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

**Officer/Director Detail :**

Title PD  
Name MIXSON, JOHN VIRGIL  
Address 5386 EZELL STREET  
City-State-Zip: GRACEVILLE FL 32440

Title SEC  
Name MIXSON, JOHNS V  
Address 5386 EZELL STREET  
City-State-Zip: GRACEVILLE FL 32440

Title VP  
Name MIXSON, BARBARA J.  
Address 5386 EZELL STREET  
City-State-Zip: GRACEVILLE FL 32440

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JOHNS V. MIXSON**

**PRESIDENT/SECRETARY 02/11/2014**

Electronic Signature of Signing Officer/Director Detail

Date