

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90736 018 ***150.00

DOCUMENT # 162706

1. Entity Name
CATTLE FARMS INC



Principal Place of Business

**#5 LAKE BREEZE CT
KENNEZ, LA 70065 US**

Mailing Address

**#5 LAKE BREEZE CT
KENNEZ, LA 70065 US**

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02202004

Chg-P

CR2E034 (10/03)

4. FEI Number

72-6021075

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND
PLANTATION, FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME CAFFERY, TAYLOR L.
STREET ADDRESS 2431 S ACADIAN THRUWAY, STE 200
CITY-ST-ZIP BATON ROUGE, LA

TITLE ☒ Change ☐ Addition
NAME **5420 Corporate Blvd.**
STREET ADDRESS **Baton Rouge, LA 70808**
CITY-ST-ZIP

TITLE D ☐ Delete
NAME DART, STEPHEN P
STREET ADDRESS PO DRAWER 610
CITY-ST-ZIP ST FRANCISVILLE, LA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME CAFFERY, ELLIE W.
STREET ADDRESS 1574 HENRY CLAY AVE
CITY-ST-ZIP NEW ORLEANS, LA 00000

TITLE ☒ Change ☐ Addition
NAME **ALBERT N. PEMBROKE**
STREET ADDRESS **P.O. BOX 636**
CITY-ST-ZIP **KILMARNOCK, VA 22482**

TITLE D ☐ Delete
NAME BUCK, HARRY H JR
STREET ADDRESS 1305 TERRY WAY
CITY-ST-ZIP FALLSTON, MD

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME POWER, MARY B
STREET ADDRESS 3724 BISQUIER DRIVE
CITY-ST-ZIP ANCHORAGE, AK 00000

TITLE ☒ Change ☐ Addition
NAME **STEWART HUGHES**
STREET ADDRESS **6060 GEN. MEYER**
CITY-ST-ZIP **NEW ORLEANS, LA 70131**

TITLE SDT ☐ Delete
NAME DART, JOHN JR
STREET ADDRESS #3 SHADY LANE
CITY-ST-ZIP COVINGTON, LA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 15 2004 725
424-6959