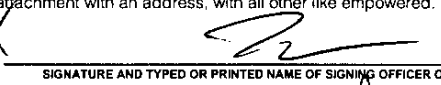


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90407 038 ***150.00

DOCUMENT # 162706 1. Entity Name CATTLE FARMS INC			
Principal Place of Business #5 LAKE BREEZE CT KENNER LA 70065 US		Mailing Address #5 LAKE BREEZE CT KENNER LA 70065 US	
2. Principal Place of Business, Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State Kenner, LA		City & State Kenner, LA	
Zip 70065		Zip 70065	
Country US		Country US	
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 CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND PLANTATION, FL 33324		7. Name and Address of New Registered Agent 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, 2006 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 NAME STREET ADDRESS CITY-ST-ZIP	PD CAFFERY, TAYLOR L. 5420 CORPORATE BLVD, #101 BATON ROUGE, LA 70808	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DART, STEPHEN P PO DRAWER 610 ST FRANCISVILLE, LA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Delete ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEMBROKE, ALBERT N PO BOX 636 KILMARNOCK, VA 22482	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUCK, HARRY H JR 1305 TERRY WAY FALLSTON, MD	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEWART, HUGHES 6060 GENERAL MEYER AVE NEW ORLEANS, LA 70131	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDT DART, JOHN JR #3 SHADY LANE COVINGTON, LA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete ☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 		Taylor Caffery 4-25-06 928-6459	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	