

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N03300

1. Entity Name

SARASOTA COUNTY CATTLEMEN'S ASSOCIATION, INC.

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90055 017 \*\*\*\*61.25

Principal Place of Business

Mailing Address

1010 CATTLEMAN RD  
 SARASOTA FL 34232  
 US

1010 CATTLEMEN RD  
 SARASOTA FL 34232-2812  
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2665419

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BISPAN, CY J  
 1010 CATTLEMAN RD  
 SARASOTA FL 34232

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.

SIGNATURE

*Cyrus C. Bispham Jr*  
 Signature typed or printed name of registered agent and filed if applicable

*Cyrus C. Bispham Jr*  
 (NOTE: Registered Agent signature required when reinstating)

*4/21/00*  
 DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  Delete  
 NAME MARTIN, RORY  
 STREET ADDRESS 673 TATUM RD  
 CITY-ST-ZIP SARASOTA FL

TITLE P.D. David Milburn  Change  Addition  
 NAME  
 STREET ADDRESS 145 River Rd  
 CITY-ST-ZIP Venice, RI 34293

TITLE SD  Delete  
 NAME PARKER, JOHN  
 STREET ADDRESS 4311 BELL AVE  
 CITY-ST-ZIP SARASOTA FL

TITLE V.D.  Change  Addition  
 NAME Robbie MARTIN  
 STREET ADDRESS 7756 Campbell Road  
 CITY-ST-ZIP SARASOTA, RI 34240

TITLE VD  Delete  
 NAME MILBURN, DAVID  
 STREET ADDRESS PO BOX 3398  
 CITY-ST-ZIP VENICE FL

TITLE S.  Change  Addition  
 NAME Debbie EGOLF  
 STREET ADDRESS 1854 Joshua DR.  
 CITY-ST-ZIP SARASOTA, FL 34240

TITLE TD  Delete  
 NAME BISHPAM, CYRUS, JR.  
 STREET ADDRESS 7900 IBIS AVE.  
 CITY-ST-ZIP SARASOTA FL

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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)(l), 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 617, 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:

*Cyrus C. Bispham Jr*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Cyrus C. Bispham Jr*  
 Date

*4/21/00 941-371-6591*  
 Daytime Phone #

CRE037 (9/99)