

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State

02-05-2001 90052 014 ****61.25

DOCUMENT # N03300

1. Entity Name

SARASOTA COUNTY CATTLEMEN'S ASSOCIATION, INC.

Principal Place of Business

1010 CATTLEMAN RD
 SARASOTA FL 34232
 US

Mailing Address

1010 CATTLEMEN RD
 SARASOTA FL 34232
 US

27980



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2665419

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BISPAN, CY J
 1010 CATTLEMAN RD
 SARASOTA FL 34232

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.

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 \$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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
S	EGOLF, DEBBIE	1854 JOSHUE DR	SARASOTA FL 36240	<input type="checkbox"/>
TD	BISHPAM, CYRUS, JR.	7900 IBIS AVE.	SARASOTA FL	<input type="checkbox"/>
PD	MILBURN, DAVID	145 RIVER RD	VENICE FL 34293	<input checked="" type="checkbox"/>
VD	MARTIN, ROBBIE	7756 CAMPBELL RD	SARASOTA FL 34240	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	Robbie Martin	7756 Campbell Rd	Sarasota, FL 34240	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VP	Chuck Downs	P.O. Box 17052	Sarasota, FL 34276	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

CR2E037 (10/00)

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 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:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/01
 Date

941-371-6551
 Daytime Phone #