

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90360 027 ***150.00

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04172006 Chg-P CR2E034 (11/05)

DOCUMENT # 160648 1. Entity Name MCARTHUR DAIRY, INC.					
Principal Place of Business 500 SAWGRASS CORPORATE PARKWAY SUNRISE, FL 33325			Mailing Address 2515 MCKINNEY AVE. STE. 1200 DALLAS, TX 75201		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-0608937	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	V ABELL, BRADLEY C 500 SAWGRASS CORP. PKWY SUNRISE, FL 33325		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BERNON, ALAN J. 2515 MCKINNEY AVE, STE 1200 DALLAS, TX 75201	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FEHR, RICK 2900 BRISTOL HIGHWAY JOHNSON CITY, TN 37602		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS KEMPS, STEVEN J. 2515 MCKINNEY AVE, STE 1200 DALLAS, TX 75201	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C COATES, ANDY 500 SAWGRASS CORP PKWY SUNRISE, FL 33325		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOV WHITE, LOREN M 2900 BRISTOL HIGHWAY JOHNSON CITY, TN 37602		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MIRO, ANGELA B 2515 MCKINNEY AVE., STE. 1200 DALLAS, TX 75201		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FROMBERG, BARRY A 2515 MCKINNEY AVE. DALLAS, TX 75201		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
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: <u>Angela B Miro</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			APR 20 2006 214.303.3644 <small>Date Daytime Phone #</small>		