

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 215897

FILED  
Feb 07, 2008  
Secretary of State

Entity Name: WILLIAMSON CATTLE COMPANY

**Current Principal Place of Business:**

9050 NE 12TH DRIVE  
OKEECHOBEE, FL 34972

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 248  
OKEECHOBEE, FL 34973 US

**New Mailing Address:**

FEI Number: 59-0845447      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILLIAMSON, FRANK W JR  
9200 NE 12TH DRIVE  
OKEECHOBEE, FL 34972 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: WILLIAMSON, FRANK W, III  
Address: 9000 NE 12TH DRIVE  
City-St-Zip: OKEECHOBEE, FL 00000,

Title: TD ( ) Delete  
Name: WILLIAMSON, BETTY C,  
Address: 9200 NE 12TH DRIVE  
City-St-Zip: OKEECHOBEE, FL 00000,

Title: PD ( ) Delete  
Name: WILLIAMSON, FRANK W, JR  
Address: 9200 NE 12TH DRIVE  
City-St-Zip: OKEECHOBEE, FL 00000,

Title: D ( ) Delete  
Name: LARSON, KAREN W  
Address: 2110 NE 39TH BLVD  
City-St-Zip: OKEECHOBEE, FL

Title: D ( ) Delete  
Name: WILLIAMSON, KIM E  
Address: 1614 PALMCROFT DRIVE, SW  
City-St-Zip: PHOENIX, AZ 85007

Title: D ( ) Delete  
Name: WILLIAMSON, JOHN W  
Address: 9084 HWY 441 N  
City-St-Zip: OKEECHOBEE, FL 34972

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK W. WILLIAMSON, III

Electronic Signature of Signing Officer or Director

VP

02/07/2008

\_\_\_\_\_ Date