

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Mar 05 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 282767 (3)

1. Corporation Name:
DRY LAKE DAIRY, INC.Principal Place of Business
6908 HIGHWAY 98 NO.
OKEECHOBEE FL 34972-7874
USMailing Address
6908 HIGHWAY 98 NO.
OKEECHOBEE FL 34972-7874
US

3. Date Incorporated or Qualified 06/30/1964	3a. Date of Last Report 03/01/1996
4. FEI Number 59-1052239	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent RUCKS, GLEN REBECCA (MRS.) 6908 HIGHWAY 98 NO. OKEECHOBEE FL 34972	10. Name and Address of New Registered Agent
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code
	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD RUCKS, MACY S 6908 HIGHWAY 98 NO. OKEECHOBEE FL	1.1 TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	RUCKS, MACY S.
STREET ADDRESS		1.3 STREET ADDRESS	6908 HIGHWAY 98, NORTH
CITY-ST-ZIP		1.4 CITY-ST-ZIP	OKEECHOBEE, FL 34972-7874
TITLE	PD RUCKS, JOSEPH 6908 HIGHWAY 98 NO. OKEECHOBEE, FL 00000	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	AST RUCKS, GLEN REBECCA 6908 HIGHWAY 98 NO. OKEECHOBEE, FL 00000	3.1 TITLE	SECRETARY-TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	RUCKS, GLEN REBECCA
STREET ADDRESS		3.3 STREET ADDRESS	6908 HIGHWAY 98 NORTH
CITY-ST-ZIP		3.4 CITY-ST-ZIP	OKEECHOBEE, FL 34972-7874
TITLE	STD RUCKS, CHARLES 6908 HIGHWAY 98 NO. OKEECHOBEE, FL 00000	4.1 TITLE	VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	RUCKS, CHARLES
STREET ADDRESS		4.3 STREET ADDRESS	6908 HIGHWAY 98 NORTH
CITY-ST-ZIP		4.4 CITY-ST-ZIP	OKEECHOBEE, FL 34972-7874
TITLE	AS TODD, HIRAM 425 S 12TH ST LAKE WALES FL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	ASSISTANT SEC.-TREAS. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	RUCKS, SUTTON, JR
STREET ADDRESS		6.3 STREET ADDRESS	6908 HIGHWAY 98 NORTH
CITY-ST-ZIP		6.4 CITY-ST-ZIP	OKEECHOBEE, FL 34972-7874

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Glen Rebecca Rucks GLEN REBECCA RUCKS 2/27/97 941 763-4139
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)