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

PROFIT Feb 23 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #

1. Corporation Name 344042 WAUCHULA FEED STORE INC Principal Place of Business Mailing Address 302 W MAIN ST -302 W MAIN ST P. O. BOX 1209 P. O. BOX 1209 WAUCHULA FL 33873-2824 DO NOT WRITE IN THIS SPACE WAUCHULA FL 33873-2824 3. Date Incorporated or Qualified 04/04/1969 2, Principal Place of Business Mailing Address 4. FEI Number Applied For 26 59-1296788 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Ζıρ Country This corporation owes or has paid the current/ear Intangible 24 Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SPEARS, A. RAY **HOLLAND TOWN ROAD** 82 Street Address (P.O. Box Number is Not Acceptable) WAUCHULA FL 33873 83 84 Zip Code 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 Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition SPEARS, LOCA NAME 1.2 NAME STREET ADDRESS HOLLAND TOWN ROAD 1.3 STREET ADDRESS WAUCHULA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change TITLE 21 TITLE Addition SPEARS, MICHAEL RAY NAME 2.2 NAME **HOLLAND TOWN ROAD** STREET ADDRESS 2.3 STREET ADDRESS WAUCHULA FL CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE PD 3.1 TITLE Change Addition SPEARS, RAY 3.2 NAME HOLLAND TOWN ROAD STREET ADDRESS 3.3 STREET ADDRESS **WAUCHULA FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 41 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change TITLE Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 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 annual report or suppliemental 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 a attachment with an address

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