## FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 18, 2001 8:00 am Secretary of State **DOCUMENT # 344042** WAUCHULA FEED STORE INC 05-18-2001 91576 042 \*\*\*150 00 Mailing Address Principal Place of Business 202 W MAIN ST 302 W MAIN ST AUUDJUJU P. O. BOX 1209 P. O. BOX 1209 WAUCHULA FL 33873-2824 WAUCHULA FL 33873-2824 3. Mailing Address 2. Principal Place of Business . POBON *30 Wi M*AIN DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-1296788 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SPEARS, A. RAY Street Address (P.O. Box Number is Not Acceptable) HOLLAND TOWN ROAD WAUCHULA FL 33873 Zip Code City FL 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. CR2E034 (10/00) Change ☐ Addition DST Delete TITLE TITLE SPEARS, LOCA NAME NAME STREET ADDRESS HOLLAND TOWN ROAD STREET ADDRESS CITY-ST-ZIP WAUCHULA FL CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE SPEARS, MICHAEL RAY NAME NAME STREET ADDRESS HOLLAND TOWN ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WAUCHULA FL ☐ Change ☐ Addition -O9 Delete ----TITLE . TITLE SPEARS, RAY NAME NAME STREET ADDRESS HOLLAND TOWN ROAD STREET ADDRESS CITY-ST-7IP WAUCHULA FL CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

may 4,3001 West of State plin of Carp. Part 1500 Sallahassee Fl. 32302-1500 I am enclosing my their in the Gentlemen amount 9 4150.00 for Business Repait. Iling # 344042 I am very sarry for the delay. my pushand who runs the business has Treda stroke and I am trying to put the loose ends to jether and New The Jusiness Shank you for your understanding and cooperation in Sincerely Mis Ray Spears

Central Fla. Lawn & Garden

230 West Main St. P. O. Box 1209 (Ph. 813-773-6215) Wauchula, Fla. 33873 Hachment

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