2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED May 31, 2000 8:00 am Secretary of State DOCUMENT # 350310 1. Entity Name POSEY DAIRY, INC. 05-31-2000 90083 026 ***150.00 Principal Place of Business Mailing Address POSEY DAIRY, INC. 3600 ST RD 70 WEST 15402 HWY 70 E. LAKE PLACID FL 33852 OKEECHOBEE FL 34972-8285 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1270931 Not Applicable Zip Country Country \$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 POSEY, ELVIE Street Address (P.O. Box Number is Not Acceptable) 15402 HWY 70 E. **OKEECHOBEE FL 34972** Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) <u>-FILE NOW!!!-FEE:IS-\$150.00-</u> 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5:00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Addition ☐ Delete TITLE POSEY, ELVIE NAME 15402 HWY 70 E. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OKEECHOBEE FL 34972 Change ☐ Addition ☐ Delete TITLE NATHAN POSEY NAME NAME STREET ADDRESS 15402 HWY 70 E STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OKEECHOBEE FL Change ☐ Addition ☐ Delete TITLE TITLE ROSEMARY POSEY NAME NAME 15402 HWY 70 E. STREET ADDRESS STREET ADDRESS OKEECHOBEE FL CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE REBECCA POSEY SMITH NAME NAME 15402 HWY 70 E. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OKEECHOBEE FL ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this filling 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

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