

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathison
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JUN -1 AM 9:40

DOCUMENT # 354266 (9)

1. Corporation Name

ARIZONA-FLORIDA LAND & CATTLE COMPANY

Principal Place of Business

Mailing Address

*** AZL RESOURCES, INC.
SUITE 1100
CONCORD CA
US**

*** AZL RESOURCES, INC.
SUITE 1100
CONCORD CA
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/23/1969

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

2a. Mailing Address

21 2300 Clayton Rd., Ste. 1100 25 2300 Clayton Rd., Ste. 1100

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-1275154

Applied For

Not Applicable

City & State

City & State

23 Concord, CA

28 Concord, CA

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☒ No

Zip

Country

Zip

Country

24 94520-2100

25 USA

29 94520-2100

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 required for person named as registered agent and their acceptance)

(Signature required for Registered Agent separately required when mandating)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
SD
NAME
WILKES, MCCLAVE
STREET ADDRESS
72 CUMMINGS POINT RD
CITY, ST, ZIP
STAMFORD CT

11 TITLE
☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

TITLE
PTD
NAME
CRAIG, R. DEASY
STREET ADDRESS
2300 CLAYTON RD SUITE 1100
CITY, ST, ZIP
CONCORD CA

21 TITLE
☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP

TITLE
D
NAME
SUTTON, PETER A.
STREET ADDRESS
2300 CLAYTON RD SUITE 1100
CITY, ST, ZIP
CONCORD CA

31 TITLE
☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

TITLE
AS
NAME
GROSS, ARTHUR L.
STREET ADDRESS
2300 CLAYTON RD SUITE 1100
CITY, ST, ZIP
CONCORD CA

41 TITLE
☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

TITLE
AS
NAME
GAYDA, MICHAEL D.
STREET ADDRESS
2300 CLAYTON RD SUITE 1100
CITY, ST, ZIP
CONCORD CA

51 TITLE
☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

TITLE
AS
NAME
THOMAS, RAYFORD S
STREET ADDRESS
2300 CLAYTON RD., STE. 1100
CITY, ST, ZIP
CONCORD CA

61 TITLE
☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

Michael D. Gayda

Michael D. Gayda, Assistant Secretary 5/22/95

(Signature and typed on printed name of signing officer or director)

(510) 602-4000