2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 429940

Entity Name: ONE NINE CATTLE COMPANY, INC.

FILED Feb 19, 2009 Secretary of State

Current Principal Place of Business: New	Principal Place of Business:
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16525 HIGHWAY 98 NORTH OKEECHOBEE, FL 34972

Current Mailing Address: New Mailing Address:

16525 HIGHWAY 98 NORTH OKEECHOBEE, FL 34972

FEI Number: 59-1487505 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BASS, ELDA MAE BASS, ELDA MAE STD
16525 HIGHWAY 98 NORTH
OKEECHOBEE, FL 34972 US BASS, ELDA MAE STD
16525 HIGHWAY 98 NORTH
OKEECHOBEE, FL 34972 US

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: ELDA MAE BASS 02/19/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 BASS, GLENN,
 Name:
 BASS, GLENN J PD

Address: 16525 HIGHWAY 98 NORTH Address: 16525 HIGHWAY 98 NORTH
City-St-Zip: OKEECHOBEE, FL City-St-Zip: OKEECHOBEE, FL

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 BASS, ELDA MAE,
 Name:
 BASS, ELDA MAE STD

 Address:
 16525 HIGHWAY 98 NORTH
 Address:
 16525 HIGHWAY 98 NORTH

 City-St-Zip:
 OKEECHOBEE, FL
 City-St-Zip:
 OKEECHOBEE, FL

Title: VD () Delete Title: () Change () Addition

 Name:
 BASS, ELWYN
 Name:

 Address:
 16525 HWY 98 N
 Address:

 City-St-Zip:
 OKEECHOBEE, FL
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 BASS, J.C.
 Name:

 Address:
 16525 HWY 98 N
 Address:

 City-St-Zip:
 OKEECHOBEE, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELDA MAE BASS STD 02/19/2009