

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 520679

FILED
Mar 13, 2009
Secretary of State

Entity Name: A & G CATTLE CORPORATION

Current Principal Place of Business:

HWY 98 W.
P.O. BOX 785
OKEECHOBEE, FL 34973

New Principal Place of Business:

HWY 98 W.
BOX 785
OKEECHOBEE, FL 34973

Current Mailing Address:

HWY 98 W.
P.O. BOX 785
OKEECHOBEE, FL 34973

New Mailing Address:

FEI Number: 59-1709295 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, ROSALIND G
14015 N W 144TH TRAIL
OKEECHOBEE, FL 34972 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: SMITH, AVENA-LYN
Address: P.O. BOX 785 - HWY 98 NORTH
City-St-Zip: OKEECHOBEE, FL

Title: P () Delete
Name: SMITH, ROSALIND G.,
Address: 14015 NW 144TH TRAIL
City-St-Zip: OKEECHOBEE FL,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ROSALIND G SMITH

P

03/13/2009

Electronic Signature of Signing Officer or Director

Date